Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia. The ASPIRE Project: Research report
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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, present and future; and we value Aboriginal and Torres Strait Islander history, culture and knowledge.

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Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia. The ASPIRE Project: Research report

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This work is part of the ANROWS Horizons series. ANROWS Horizons (Research reports) are in-depth reports on empirical research produced under ANROWS’s research program.

This report addresses work covered in ANROWS research project 1.2 "Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia". Please consult the ANROWS website for more information on this project. In addition to this paper, an ANROWS Landscapes and Compass are available as part of this project.
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Executive summary

Immigrant and refugee women in Australia are known to face particular barriers accessing services aimed at preventing and responding to family violence. However, there is limited evidence about the contexts, nature and dynamics of violence against immigrant and refugee women that can inform the development of responsive and accessible community-based interventions. This report outlines findings from research commissioned by Australia’s National Research Organisation for Women’s Safety (ANROWS) entitled Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia that aimed to contribute to the currently limited evidence base. The project, known as ASPIRE (Analysing Safety and Place in Immigrant and Refugee Experience), was led by researchers from the University of Melbourne, the Multicultural Centre for Women’s Health, and the University of Tasmania. Research was conducted in eight sites across urban and regional settings in Victoria and Tasmania.

Project aim

The overall aim of the ASPIRE project was to increase understanding of the nature and dynamics of violence against immigrant and refugee women in different Australian contexts. Our specific research questions were:

1. What are immigrant and refugee women's experiences of family violence and of help-seeking, in selected geographic communities in Australia?
2. What are local barriers and facilitators to immigrants and refugees accessing violence prevention and support services in different settings?
3. What opportunities exist for supporting community-led responses to family violence against immigrant and refugee women?

Methods

We reviewed the international literature on family violence against immigrant and refugee women to inform the research design. This review was published as an ANROWS Landscapes State of knowledge paper (Vaughan et al. 2015a). The research design and subsequent analysis of data were also underpinned by principles of participatory research, an intersectional feminist approach and input from two state-based advisory groups consisting of representatives from the family violence, women’s health, multicultural, settlement and justice sectors. Data were collected using a combination of qualitative methods including:

- **46 in-depth interviews** with immigrant and refugee women who had experienced family violence;
- **46 key informant interviews** with representatives from the family violence, settlement, multicultural, interpreting, and law and justice sectors;
- **26 focus group discussions** with 18 groups of women and 8 groups of men from different cultural communities; and
- **a Photovoice project** with ten women from immigrant and refugee background that enabled them to share their perspectives and priorities about family violence through photography, written reflection and group discussion.

Key findings: importance of context

Thematic analysis of the data suggested that immigrant and refugee women’s experiences of family violence, help-seeking, and access to information and services, were situated within four overarching contexts.
Immigration context

Conditions created by immigration and, in particular, visa class, often shaped women’s experiences of family violence after settlement. This was particularly the case when visa sponsorship established a dynamic of women’s dependency on men, and when the conditions of temporary visas restricted women’s access to employment, social security, housing, healthcare, childcare and education. Migration led to social isolation for many women, and perpetrators of family violence frequently perpetuated or capitalised on this isolation by preventing women from socialising, learning English, getting information, and accessing services and rights. Many women interviewed in this study who were on temporary visas had applied for residency through the Family Violence Provision or Complementary Protection Visa scheme. These women often reported spending prolonged periods of time on bridging visas, with restricted access to services causing stress detrimental to physical and mental health, while they awaited the outcomes of their applications.

Family and community context

Participants described a range of social, religious and personal values that contributed to the normalisation of family violence in various cultural contexts, but generally held the view that culture, in itself, was not a cause of family violence. Women interviewed observed that family violence can occur in any family and in any cultural context, and attributed the perpetration of violence to the beliefs held by some families that men should have power over women and control the family environment. Many women interviewed described the dominance of men in their families, which was often reinforced by other family members, including those living overseas. Some families and communities pressured women not to take action against men who used violence against them. Women who did so often faced community ostracism and threats to their safety. Importantly, however, in some situations certain family and community members were trusted sources of support for women, and helped them to either remove perpetrators, leave the family home, and access services and rights.

Service system context

Despite differences between Victorian and Tasmanian family violence legislation and integrated response mechanisms, outcomes for immigrant and refugee women were quite similar. Analysis of interview data suggested that services in both states were under immense pressure to respond to family violence generally and were under-resourced to adequately meet the specific needs of immigrant and refugee women. Key informants reported there were high costs associated with assisting immigrant women and their children who had no income and who required assistance for complex legal, immigration and protection matters. These costs significantly affected family violence services and women’s refuges. In many settings there were notable communication, policy and practice gaps between family violence and settlement services. Despite these challenges, many key informants expressed strong commitment to actively developing their ability to meet the needs of immigrant and refugee women within their own agencies and were working collaboratively with other services.

Place-based context

In regional areas, the pressured family violence system faced additional constraints caused by the limited availability of key services for immigrant and refugee women, in particular interpreters and migration legal services. Regional women’s refuges reported accommodating high numbers of immigrant women, as regional refuges were often less constrained by the duration of time women may need to stay. These services were nevertheless constrained by limited funding. Regional refuges reported assisting immigrant women to re-settle in the local area and the women themselves described a range of benefits of regional life. However experiences of racism, discrimination and cultural isolation in some of these settings created new risks and concerns. Co-location of family violence, social, law and justice, and other services was highlighted as a promising place-based feature with particular benefits for immigrant and refugee women. Notable examples included the Neighbourhood Justice Centre in the City of Yarra and health justice partnerships with a focus on immigrant women, such as that based at Dandenong Hospital.
Key findings: Women’s experiences

Women interviewed about their experiences of family violence had diverse migration pathways, were born in 21 different countries, and had varied socio-economic and other circumstances. However there were commonalities in their experiences of family violence, help-seeking and access to information and services.

Experiences of family violence

The majority of women interviewed reported family violence perpetrated by their male partner (husband or de facto); a small number of women reported violence perpetrated primarily by their father. A number of women also reported family violence perpetrated by extended family, including family members overseas. Women reported that perpetrators used physical, sexual, emotional, psychological and financial violence (including abuse related to dowry and other inter-familial financial relations), as well as verbal and religious abuse, intimidation, shaming, reproductive control, online abuse and harassment and imposed social isolation. Immigration-related violence was reported in most circumstances. This included threats of deportation (often without their children), visa cancellation, and withholding immigration documents. Consequences of family violence reported by immigrant and refugee women included harms to physical and mental health, long-term trauma, periods of homelessness and financial difficulties.

Communication and access to information

Challenges with communication and accessing information were a significant feature in women’s experiences, with women struggling to access accurate information about their rights in relation to family violence, family law and immigration matters. Several women, and many service providers, reported problems communicating through interpreters and instances of unprofessional and dangerous interpreter behaviour. These issues were worsened by the limited availability of interpreters in regional settings. Key informants and women interviewed felt that female interpreters were preferable for family violence work, though professionalism and an understanding of the dynamics of family violence were seen as more important than the gender of the interpreter. Interpreters themselves reported particular challenges with interpreting in relation to family violence, including vocabulary limitations and taboos, a sense of responsibility for clients’ safety or liberty, and vicarious trauma including the re-traumatising of interpreters from refugee backgrounds. Interpreters interviewed received no debriefing or counselling support, and had never had any training in relation to family violence.

Experiences with service systems

Women most often sought assistance at the point of crisis with initial contact usually with police or family violence response services. Some women reported referral to family violence services by a range of other agencies, friends, family, neighbours and employers. A number of women described “missed opportunities” for getting help from health services. Most commonly, women found the only way to resolve their situation was to escape their homes, often with no idea of what would happen next. These women and their children often ended up in short-term crisis accommodation and subsequently refuges for long periods of time. While most women had positive experiences with family violence services, many also reported difficulties accessing these services due to high demand (and especially if they did not wish to leave the perpetrator). Access to a bilingual, bicultural family violence worker or a multicultural family violence support group was very rare but highly valued. Such specialist services are extremely limited, especially in Tasmania.

Women had inconsistent experiences with police and justice responses in both states. Some women had positive experiences with police where they received care and protection, but many reported feeling dismissed, disbelieved, blamed and discriminated against by police officers. Perspectives on pro-arrest and pro-prosecution justice responses were mixed with some women expressing relief when police took immediate action, while others had not anticipated, and were overwhelmed by, the rapid response or confused because of previous inaction by police. Women were generally happy to receive family violence orders for protection, though many women had to deal with perpetrators who contested orders over multiple hearings and or applied for cross-orders as an intimidation tactic. Women also described being bullied by perpetrators through the family law system and felt that this undermined their capacity to protect their children.
Prevention of family violence in immigrant and refugee communities

Few women and community members were aware of or had been exposed to family violence prevention initiatives targeting immigrant and refugee communities. Existing programs were limited in reach and often not sustained over time, had rarely been rigorously evaluated and may not have been inclusive of the contexts and forms of violence women experience. The research team encountered individuals and groups of immigrant women providing grassroots, voluntary family violence support to women and advocating against violence in their communities in both Victoria and Tasmania. These volunteers are providing invaluable leadership in community settings upon which prevention interventions could be built.

Key messages for service providers and policy-makers

Findings from the ASPIRE project give rise to a number of recommendations for federal and state-based government and community agencies to strengthen prevention of and responses to family violence against immigrant and refugee women. Action is required to:

• Amend immigration policy to recognise that the range of potential perpetrators of family violence extends beyond the person sponsoring a woman’s partner visa, and can include multiple family members; expand access to the family violence provisions to include people on prospective marriage visas who are not yet married; ensure timely processing of applications for complementary protection because of family violence; and remove barriers to Centrelink income support and Medicare-funded services for any victim of family violence.
• Increase strategic and direct service linkages between agencies relevant for immigrant and refugee families and family violence responses, especially in areas with large or growing immigrant and refugee communities.
• Ensure definitions and risk assessments for family violence across Australia are relevant for immigrant and refugee populations by recognising that family violence includes multi-perpetrator violence, immigration-related abuse, ostracism from community, and exploitation of inter-familial financial obligations.
• Train and resource services that come into contact with immigrant and refugee women to understand and respond to the dynamics of family violence, maintain the privacy and confidentiality of women disclosing family violence, and facilitate referral pathways to specialist support.
• Recognise interpreters as an integral part of the family violence system, and support reform of the interpreting industry to ensure high-quality family violence interpreting through development of interpreter capacity, with recognition and remuneration for specific expertise in relation to family violence; development of mechanisms for maintenance of interpreter standards; and provision of debriefing and other support to interpreters.
• Ensure agencies working in response to family violence, including family violence services, law and justice, health, housing and other services are adequately funded to engage professional interpreters where necessary, and that adherence to organisational policies requiring engagement of interpreters is monitored.
• Create multi-language written and audio resources for broad dissemination in places that are central to daily life (such as health services, housing services, shopping and community centres) to provide information about family violence, contact information for crisis support and other family violence services, and what to expect from family violence services and justice responses.
• Provide options for women so they can choose to access “mainstream” as well as specialist multicultural family violence services, including refuges funded to provide intensive and long-term support for immigrant and refugee women.
• Develop a robust bilingual, bicultural family violence services workforce that is trained and supported to respond to the needs of immigrant and refugee families.
• Provide ongoing training to all parts of the family violence system about the additional risk factors, immigration issues, and support needs of immigrant and refugee women and their children.
• Ensure family violence prevention programs engage with multicultural women’s services and women leaders from immigrant and refugee communities.

Key messages for researchers

The ASPIRE project contributes to the Australian literature on family violence against immigrant and refugee women, however there remain a number of limitations to the current state of knowledge. Future research should include:

• Investigation of the experiences of women who have no connection with service providers while dealing with family violence (most women participating in ASPIRE were already connected into the family violence system).
• Collaboration with police to examine their capacities and experiences responding to family violence in immigrant and refugee communities.
• Analysis of the effectiveness of family violence risk assessment tools when used with immigrant and refugee
women, and potentially the piloting and evaluation of adapted risk assessment processes.

- Bilateral comparative studies with researchers in major source countries for migrants settling in Australia, to improve supports available to women experiencing family violence in both their homeland and in post-migration diasporic contexts, including family violence facilitated by communication technologies.
- Rigorous evaluation of programs that address the primary prevention of violence against immigrant and refugee women.
- Strategies to ensure that research to establish the prevalence of family violence in Australia involves collection of sufficient data from immigrants and refugees, including people on temporary visas, to generate robust estimates of prevalence in these particular populations.
- Longitudinal investigation as to how acculturation affects the prevalence of family violence and violence-supporting attitudes in communities.
Introduction

This research report outlines findings from the ASPIRE (Analysing Safety and Place in Immigrant and Refugee Experience) project. This research project aimed to increase understanding of the nature and dynamics of violence against immigrant and refugee women in different Australian contexts, and was undertaken with immigrant and refugee communities in eight locations in Victoria and Tasmania.

Terms central to this report, such as “family violence”, can be understood to mean different things by policymakers, service providers and community members in the different jurisdictions across Australia. We therefore start with a brief explanation of central concepts and terms as they are used in this research report. We have previously defined our use of terms in Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia: The ASPIRE Project: State of knowledge paper, and draw upon this material here. The State of knowledge paper can be accessed through the ANROWS website.

Family violence

In this research report we use the broad understanding of “family violence” described in the Victorian Family Violence Protection Act (2008), as it is inclusive of a variety of types of family violence and of family-like relationships, making it particularly relevant for the experience of immigrant and refugee women.

The Act defines family violence as behaviour by a person towards a family member of that person that is physically, sexually, economically, emotionally or psychologically abusive, or threatening, coercive or controlling in such a way as to cause that family member fear. Behaviour by a person that causes a child to hear, witness or otherwise be exposed to the effects of the behaviours listed above is included in the definition of family violence. This definition incorporates violence perpetrated by a current or former partner as well as any other person who is a relative of the family member against whom violence is perpetrated. “Relative” is inclusive of parents, grandparents, children, siblings, aunts, uncles, nieces, nephews, cousins and relatives by marriage (“in-laws”). In addition, other family-like relationships are recognised in the Act, including relationships of dependence or interdependence, carers (e.g. for persons with disabilities), and persons in community and cultural contexts regarded as family.

The Tasmanian Family Violence Act (2004) provides a similar description of family violence behaviours and also recognises the detrimental impact of violence on children; however, the family relationship is currently limited to intimate partner relationships (current or former spouse or partner) and does not necessarily capture the breadth of relationships where immigrant and refugee women may be subjected to violence.

Language used to describe violence

In this research report we use selected terminology to describe those who use violence and those who are impacted by violence. The person using violence is referred to as a “perpetrator” or, when referring to circumstances where women are subjected to violence from multiple persons in the family setting, as “perpetrators”. The term perpetrator denotes responsibility for violence and is commonly used in the family violence sector in Victoria and Tasmania. In most of the circumstances described in this report the perpetrators are men and male pronouns are used. However, some participants in this project described instances where other women in the family joined with men to perpetrate abuse and this will be indicated accordingly.
As all interviewees who experienced family violence identified as women, the person(s) who are impacted by violence are usually described in this report as the "woman" or "women", and where relevant "women and (their) children". At other times, the term "victim" is used to acknowledge that women are subjected to harm caused by the perpetrator. This term refers to the power imbalance between those who perpetrate violence and those who are made victims of violence and is not intended to indicate passivity; all women interviewed for this project resisted violence in a variety of subtle and overt ways to survive their circumstances. Although used infrequently in this report, it should be acknowledged that some women may prefer the term "survivor".

In this research report we attempt to avoid language that mutualises responsibility for violence such as "violent relationship" or "dispute". Such discourse obscures the operation of power in family violence by inadvertently blaming victims for their circumstances and detractions from perpetrators' deliberate choice to use violence (Coates & Wade, 2007). It should be noted, however, that this report will use verbatim quotes which may include mutualising language.

We do not use the real names of women or key informants interviewed, or of participants in focus group discussions. Women chose pseudonyms during interviews and these are used throughout. To contextualise quotes from key informant interviews, we indicate the broad sector and state in which the key informant was working when interviewed. To further ensure anonymity of key informants, we have clustered key informants' "sectors" into three broad groups: family violence service providers, settlement service providers, and law and justice service providers.

**Risk and vulnerability**

The terms "risk" and "vulnerability" are frequently used interchangeably in literature discussing violence against immigrant and refugee women. It is important, however, to distinguish between these two terms to acknowledge that the risk of violence is caused by the behaviours and deliberate acts of control used by the perpetrator(s), and that immigrant and refugee women and children are made vulnerable by perpetrators who exploit their isolation, immigration status, communication barriers, social and economic disadvantage, and other personal circumstances. Other related terms in this report include "risk factor" and "risk assessment".

"Risk factor" refers to any of a set of behaviours and circumstances that evidence shows are associated with an increased likelihood and or severity of family violence (Victoria. Department of Human Services, 2012). For example, risk factors include controlling behaviours, jealousy, obsession, use of weapons, stalking and threats to kill, as well as circumstances such as pregnancy which are associated with escalation of violence.

“Risk assessment” refers to processes of assessing the presence and or likelihood of various risk factors in terms of timing, severity and consequences (Victoria. Department of Human Services, 2012). Across Australian jurisdictions, a number of assessment tools are used to assess family violence risks. In Victoria, service providers use the Family Violence Risk Assessment and Management Framework (usually referred to as the Common Risk Assessment Framework or CRAF) to assess family violence risk. In Tasmania, service providers use a range of actuarial assessment tools such as the Spousal Abuse Risk Assessment tool and the Dangerousness Assessment. It should be noted that our searches of the published literature were unable to identify risk assessment tools that have been adapted for use with immigrant and refugee women in Australia, although verbal consultations with service providers suggest that available tools are sometimes adapted on an ad hoc basis.

**Immigrants, refugees and asylum seekers**

This report draws on definitions used in international migration law as described by the International Organization for Migration (IOM) to define immigrants, refugees and asylum seekers (2004).

A refugee is any person who, owing to a well-founded fear of being persecuted for reasons of race, religion, nationality or membership of a particular social group or political opinion, is outside the country of his/her nationality and is unable, or owing to such fear is unwilling, to avail himself/herself of the protection of that country.

An asylum seeker is a person seeking to be admitted into a country as a refugee and awaiting decision on their application for refugee status under relevant international and national instruments.

The IOM notes that there is no universally accepted definition of immigrant (or migrant); however, it is usually understood to cover all cases where the decision to migrate is taken freely by the individual concerned and without the intervention of an external compelling factor. That being said, compelling factors intertwined with complex family obligations and circumstances did impact on several of the women interviewed in this report who would be classed as immigrants. In addition, some women arrived in Australia as immigrants and later became asylum seekers due to the violence perpetrated against them.

**Culturally and linguistically diverse**

Culturally and linguistically diverse (CALD) is a broad descriptor for communities with diverse language, religious and ethnic backgrounds, and is commonly used by government and community agencies (Ethnic Communities’ Council of Victoria,
While the term CALD is included in some verbatim quotes and references used in this report, we preferentially use the term “immigrant and refugee” to describe women and men whose first language is not English, and who were, or have a parent who was, born overseas. We use this term to highlight the fact that immigrating to another country has fundamental consequences for families. Immigrants and refugees can be denied access to, or have difficulty accessing, a broad range of social benefits and entitlements, including social mobility and the right to be with family. We acknowledge that “cultural diversity” issues do not exist in isolation and cut across a whole range of policy issues and portfolios relevant to family violence such as law, justice, health, housing, education, settlement, immigration and citizenship.

**Family violence against immigrant and refugee women: Current state of knowledge**

In 2015 we conducted a comprehensive review of the international literature on family violence against immigrant and refugee women. The review encompassed peer-reviewed and grey literature (such as policy reports, evaluations and community-based research) published in English between January 1990 and March 2015 in Australia, New Zealand, Canada, the European Union, the United Kingdom and the United States of America. The resulting 133 peer-reviewed articles and 28 grey literature documents were subjected to thematic synthesis and presented in the ANROWS State of knowledge report, *Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia: The ASPIRE Project* (Vaughan et al., 2015a). The complete report can be accessed through the ANROWS website, with key findings summarised below.

It is clear from the international literature that family violence occurs in all countries and across all cultures. A systematic review by the World Health Organization (WHO) suggested that almost one third (30%) of women worldwide who have ever been in a relationship reported having experienced physical and or sexual violence perpetrated by their partner (2013). That review did not capture the full extent of violence perpetrated within the context of families (i.e. outside of intimate partner violence), but nonetheless confirms that family violence is a "global public health problem of epidemic proportions" (WHO, 2013, p. 3), and is perhaps the most common violation of the rights of predominantly women and children. In Australia, the most recent large-scale prevalence study is the Australian Bureau of Statistics’ (ABS) 2012 Personal Safety Survey, which shows that approximately one in six Australian women (16.9%) reported experiencing physical or sexual violence from a current or former cohabitating partner since the age of 15, and one in four Australian women (24.5%) reported experiencing at least one incident of emotional abuse by a current or former cohabitating partner (Australian Bureau of Statistics, 2012).

Although such figures on the prevalence of women’s experiences of violence are context-setting, specific claims about the prevalence of violence against immigrant and refugee women are incomplete and inconclusive. For example, further analysis conducted by ANROWS noted that it is impossible to draw conclusions about the prevalence of violence against immigrant women in Australia on the basis of the 2012 Personal Safety Survey data, because the survey, which was primarily completed in English, was unable to access a statistically valid sample of women from culturally and linguistically diverse backgrounds (Cox, 2015, p. 53). More generally, our review found that prevalence studies rarely included analysis of the specific experiences of immigrant and refugee women compared with other women in countries of resettlement. For these reasons, it is presently not possible to say whether the prevalence of family violence against immigrant
and refugee women in Australia, or other settlement contexts, is different to the prevalence of family violence against other women.

Overall researchers have found that immigrant and refugee women report similar types of family violence as women from non-immigrant backgrounds; however, immigrant and refugee women are more likely to experience multi-perpetrator family violence, involving extended families and community members (see for example, Dasgupta, 2007; Gill, 2008; Salter, 2014). Synthesis of the international literature suggested perpetrators of violence against immigrant and refugee women could also exploit women’s social isolation and their lack of access to information about their immigration rights, misinforming women about their visa status and making threats of deportation and the removal of children (Burman & Chantler, 2005; Erez, Adelman, & Gregory, 2009; Erez & Globokar, 2009; Ghafournia, 2011; Morash, Bui, Yan, & Holtfrer, 2007; Ogunsiji, Wilkes, Jackson, & Peters, 2011). Studies also found that immigration policies may create conditions of dependence on perpetrators for economic security and residency rights (Anitha, 2010; Bhuyan, 2012; Ghafournia, 2011; Thronson, 2012).

The health and wellbeing consequences of family violence for immigrant and refugee women were reported to be similar to those experienced by other victims of family violence, and included harms to physical health and mental health (Fisher, 2013; Rees & Pease, 2007). Some studies suggested that immigrant and refugee women were more likely to suffer exacerbated health and wellbeing consequences because they tended to endure violence for longer periods of time before accessing support (Colucci & Montesinos, 2013; Hicks & Bhugra, 2003).

Studies found that immigrant and refugee women had a range of views about what constitutes family violence, with researchers finding variability among and within groups as to how some immigrant and refugee women recognised and defined family violence. Some researchers found that immigrant and refugee women only associated family violence with physical abuse, not recognising sexual, financial or other forms of violence (Ahmad, Driver, McNally, & Stewart, 2009; Ogunsiji et al., 2011; Zannettino, 2012). However, other studies demonstrated that women held broader and more nuanced views of what types of behaviours and circumstances constituted family violence, particularly where women had the opportunity to articulate their understandings in their own words and languages (Rees & Pease, 2007).

The community context was found to play an ambivalent role in how women understood and responded to family violence. In some immigrant and refugee communities it was reported that sociocultural norms regarding marriage and gender roles were viewed as providing reassuring continuity, and sustaining social and community structure and organisation. However, sociocultural norms were sometimes seen to contribute to the ways in which women were made to bear responsibility for family violence and were pressured or shamed to maintain the status quo in family relationships (Ahmad et al., 2009; Bui & Morash, 2008; Ogunsiji et al., 2011). Several studies also suggested that traditional expectations in relation to gender roles and marriage could be profoundly challenged by changed circumstances in settlement countries, particularly when men were unable to sustain their traditional role of breadwinner (Bui & Morash, 2008; Hyman, Mason, Guruge, Berman, Kanagaratnam, & Manuel, 2011).

Many of the help-seeking barriers experienced by immigrant women were reported to be similar to those experienced by other women, but with some additional features (Erez & Ammar, 2003). Overall, studies confirmed that in Western countries immigrant women are less likely than non-immigrant women to seek help in response to family violence (Ghafournia, 2011; Gilroy, McFarlane, Nava, & Maddoux, 2014; Taft, Small, & Hoang, 2008). Researchers reported many reasons as to why immigrant and refugee women may be reluctant to seek help for family violence, including limited knowledge of available services, fears of retribution from multiple perpetrators, concerns for the perpetrators themselves or the consequences of using legal systems, previous negative experiences from contact with services including racism and anti-immigration sentiment, and wanting to maintain a positive reputation for their communities (Ghafournia, 2011; Rees & Pease, 2007; Zannettino, 2012).

Review of the literature suggested language barriers could also inhibit women’s access to services, particularly when women have concerns about an interpreter’s confidentiality, or experience problems with interpreters’ competency, impartiality and professionalism (Erez & Ammar, 2003; Guruge & Humphreys, 2009; Immigrant Women’s Domestic Violence Service, 2006). Researchers also found that language barriers could significantly undermine immigrant women’s access to the justice system and legal rights (Erez & Globokar, 2009; InTouch Multicultural Centre against Family Violence, 2010).

Many studies noted that when immigrant and refugee women do seek professional assistance, it is after a prolonged period of violence and is usually during times of crisis caused by increasing severity of violence, lessening effectiveness of survival strategies, and growing concerns for the welfare of children (Ahmad et al., 2009; Australian Muslim Women’s Centre for Human Rights, 2011; Finfgeld-Connett & Johnson, 2013). Some studies reported that immigrant women may prefer to seek help from ethnospecific or settlement services (due to reduced language barriers and cultural sensitivity), rather than so-called “mainstream” or “generic” family violence services (Anitha, 2010; Gill & Banga, 2008; In Touch Multicultural Centre against Family Violence, 2011).
However, this could be problematic when ethno-specific services had a limited understanding of family violence and reinforced traditional values in ways that disregarded women’s safety (Chung, Oswald, & Hardesty, 2009; Erez & Ammar, 2003; Immigrant Women’s Domestic Violence Service, 2006). At the same time, generic family violence services were sometimes perceived to lack understanding of immigrant and refugee women’s concerns related to immigration policy, preferences for resolving family violence without ending relationships, and challenges with managing family and community pressures (Abu-Ras, 2007; Burman & Chantler, 2005; InTouch Multicultural Centre against Family Violence, 2010; Rees & Pease, 2006). Furthermore, for refugee women who have experienced torture and trauma before migration, there is a complexity to their experiences that was not adequately addressed within existing family violence systems (Tayton, Kaspiew, Moore, & Campo, 2014; Zannettino et al., 2013).

Research described immigrant and refugee women’s mixed experiences when reporting family violence to police, ranging from responsive to racist (Dimopolous, 2010; Ghafournia, 2011; Rees & Pease, 2007). There was limited evidence that the increase in criminal justice responses to family violence, such as “mandatory arrest” and “pro-prosecution” approaches, were helpful for immigrant women. Researchers noted that these policies may deter immigrant and refugee women from seeking assistance and may lead to mistrust in the system when applied inconsistently (Bui, 2003; Martin & Mosher, 1995; Singh, 2010; Wachholz & Miedema, 2000).

International and Australian evidence in relation to effective approaches to preventing violence against immigrant and refugee women was extremely limited. While there were grassroots initiatives and community-based prevention programs working with immigrant and refugee communities in Australia, they were piecemeal and rarely documented, evaluated or sustained with adequate funding and resources. The limited research on prevention indicated the importance of consulting and engaging with community elders and leaders to develop approaches that acknowledged structural and cultural factors, as well as the diversity of experiences among immigrant and refugee communities. (Carmody, Salter, & Presterdustuen, 2014; Flood, 2013; Gregory, Bamberg, Dowd, & Marlow, 2013; Murdolo & Quiazon, 2015; Tayton et al., 2014). Furthermore, the involvement of immigrant and refugee women at the leadership level was seen as essential to developing effective prevention strategies that respond to women’s experiences with family violence (Larasi, 2013; Murdolo, 2014; Volpp, 2011).

While the State of knowledge report identified critical evidence about family violence against immigrant and refugee women, there were significant limitations to many of the studies reviewed. Despite Australia’s large overseas-born population, research about family violence against immigrant and refugee women in the local context is relatively limited. Only one quarter of the peer-reviewed studies obtained in the literature review were conducted in Australia. Most of the Australian research on this subject is found in grey literature, policy documents, discussion papers, community-based research and program evaluations. Research exploring violence against immigrant and refugee women in Australia has tended to be small scale and focused on one specific cultural community in one particular place. There are some notable exceptions in the peer-reviewed literature, which provide a basis from which to build academic work in this area (see for example Fisher, 2013; Ghafournia, 2011; Ogunsiji et al., 2011; Pittaway, MulI, & Shteir, 2009; Rees & Pease, 2007; Taft et al., 2008; Zannettino, 2012). However, there are currently too few studies to provide a robust evidence base for understanding the range, diversity and complexity of immigrant and refugee women’s experiences and help-seeking behaviours in response to family violence in Australia. In particular, there is limited evidence about the efficacy of responses and prevention efforts, from the perspective of immigrant and refugee women living in different geographic, demographic and immigration contexts.

The ASPIRE project aimed to contribute to current evidence about immigrant and refugee women’s experiences of violence and help-seeking in the context of place, family, community and migration (Vaughan et al., 2015b) by working with diverse immigrant and refugee women and communities in metropolitan and regional Victoria and Tasmania.
Aim of the research project

The project’s overall aim was to increase understanding of the nature and dynamics of violence against immigrant and refugee women in different Australian contexts. Our specific research questions were:

1. What are immigrant and refugee women’s experiences of family violence, and of help-seeking, in selected geographic communities in Australia?
2. What are local barriers and facilitators to immigrants and refugees accessing violence prevention and support services in different settings?
3. What opportunities exist for supporting community-led responses to family violence against immigrant and refugee women?

Situating the project: The policy background

Immigrant and refugee women’s experiences of violence occur within a context of Australian national and state and territory-specific social and immigration policies. The extent to which immigrant and refugee women are consulted during policy-making and to which their concerns are included in policy documents makes a significant difference to the way that they experience violence and the response they receive when seeking support and services. This section briefly summarises the Australian, Victorian and Tasmanian social policy contexts, with specific reference to immigration, multiculturalism and violence against women, in order to situate our research findings.

Australian immigration policy

Australia is one of the most culturally diverse countries in the world. Almost half of the Australian population (46%) has a direct familial link to the migration program (Australian Bureau of Statistics, 2014). Immigration has been a central feature of Australian history, identity, population growth and productivity, and, reflective of shifts in attitude and identity of the Australian public, there have been many changes in immigration policy since the end of the White Australia Policy in 1973 (Castles, Hugo, & Vasta, 2013; Jupp, 2002). However, despite the inclusion of multiculturalism in national policy since the 1970s, public opinion in Australia continues to reflect ambivalent and contradictory attitudes towards the presence of immigrants and refugees. In part, this is because policies and strategies in support of multiculturalism are bound to a legacy that valorises whiteness and denies the recognition of Aboriginal people as the original inhabitants of Australia (Henry-Waring, 2011). In this sense, support for multiculturalism co-exists with racist and discriminatory attitudes and behaviours in ways that have been described as “unsettled multiculturalism” (Wise, 2005).

The Australian immigration program has two main components that enable people to resettle in Australia on a permanent basis. The Migration Programme provides for resettlement in Australia for skilled migrants and family migrants (with the latter being sponsored by an Australian citizen or permanent resident). The Humanitarian Programme enables resettlement for refugees and people from refugee-like situations. Australian governments fund specific settlement and health services for these permanent immigrants and refugees, including a national English language program (Migration Council Australia, 2015). There is thus an acknowledgement that the state plays a central role in providing for the welfare needs of immigrants. However, self-sufficiency is simultaneously promoted, with an expectation that immigrants’ need for specialist services will diminish over time (Rivzi, 2014). Settlement services are only available to new immigrants for the first 5 years (Migration Council Australia, 2015).
The expectation of self-sufficiency is particularly pronounced for immigrants who are living in Australia on temporary visas. Over the last 20 years, the Australian immigration program has transformed from one that favours permanent settlement to one based on the temporary migration of workers and students, arriving in large part as young, productive individuals and couples, ready to join the labour force. Temporary immigrants have limitations on the extent to which they are eligible for government-funded services. For example, the 457 visa, which enables the migration of specifically skilled people for a period of up to 4 years, excludes holders from access to employment or settlement services, English-language classes or Medicare funding (Migration Council Australia 2015, p. 27). International students are required to take out specific health insurance (Overseas Student Health Cover) to access basic public services and to pay for their children’s tuition in public schools.

The number of temporary immigrants in Australia is significant. On 30 June 2015, there were 562,566 people living in Australia as primary 457 visa holders, secondary 457 visa holders (spouses and children) or student visa holders (Australia. Department of Immigration and Border Protection, 2015a). In contrast, in 2014-15, 189,097 skilled and family immigrants and only 13,756 humanitarian entrants resettled in Australia on permanent visas (DIBP, 2015b, p. 5). Including New Zealanders and people on up to year-long working holiday visas, the number of temporary immigrants living in Australia exceeds 1.2 million at any one time (Migration Council Australia, 2015, p. 3).

It is also important to recognise that there is active and ongoing movement between visa categories, with people moving from one temporary visa to another, and with both temporary workers and students ultimately making up a significant component of the permanent migration intake. In 2011-12, more than half of all permanent skilled and family visas were granted to previous 457 visa holders (Migration Council Australia, 2015). In other words, many temporary immigrants become permanent Australian residents and citizens, but permanency is prefaced by a precarious period of 4-10 years. During this interim period, immigrants are excluded from civic participation, have no voting or representation entitlements, and are not entitled to the full breadth of available government services. The risks of social exclusion and isolation, especially for women, are extremely high.

**Australian national family violence policy**

The National Plan to Reduce Violence against Women and their Children 2010-2022 (the National Plan) provides the current framework for action by the Commonwealth, state and territory governments to reduce violence against women. The vision of the National Plan is "Australian women and their children live free from violence in safe communities". The target is for "a significant and sustained reduction in violence against women and their children by 2022" (Council of Australian Governments, 2011).

With specific reference to immigrant and refugee women, the National Plan notes that violence against women crosses all races and cultures, and acknowledges that some women are at higher risk. It states a commitment to diversity in affirming that “…policy solutions to address domestic violence and sexual assault must take into account the diverse backgrounds and needs of women and their children…. [and] be relevant to all Australians…” (Council of Australian Governments, 2011, p. 11).

Implementation of the National Plan is framed by four separate action plans, with the Third Action Plan (2016-19) to be released in late 2016. The First Action Plan (2010-13) established the groundwork for the National Plan. The Second Action Plan (2013-16), themed Moving Ahead, aimed to build on the gains of the first 3 years (Australia. Department of Social Services, 2014) and advance the ways that violence against particularly vulnerable women had previously been addressed. Accordingly, the Second Action Plan stated a specific focus on three key groups: Indigenous women, women with disabilities, and culturally and linguistically diverse (CALD) women, including women on temporary visas and who are newly arrived (Australia. Department of Social Services, 2014).

Nationally, however, policy interventions and reforms relating to violence against women have so far reflected the ambivalent position government authorities have taken towards immigrants and refugees and their entitlement to welfare. Beyond broad statements of priority within the National Plan, family violence policy and response systems continue to fall short of being inclusive, equitable and responsive to immigrant and refugee women’s needs and experiences of violence. While many policy and reform documents have contained statements about diversity, inadequate funding allocation for policy and program implementation that specifically addresses the needs of immigrants and refugees has limited the extent to which policy has seen effective gains within those communities (Murdolo & Quiazon, 2015). Similarly, although the vulnerabilities faced by women on temporary visas have been acknowledged in Commonwealth government reports, this acknowledgement has not yet resulted in immigration policy reform (Australia. Department of Social Services, 2015).

In addition to the National Plan, each state and territory of Australia has developed its own specific policy response to the issue of family violence. Both the National Plan and national immigration policy work together with specific state and territory policies relating to violence against women, equitable access to service systems and justice responses, to create a range of policy contexts for immigrant and refugee women who experience and are forced to respond to family violence. The following two sections provide an outline of the specific social policy approaches in Victoria and Tasmania, the two states in which the ASPIRE research project was conducted.
Violence; Code of Practice for the Investigation of Family Act 2008

including the implementation of the Family Violence Protection Victorian government has introduced a range of measures for prevention and intervention strategies. Over the years, the systemic reform to establish an integrated systemic response to family violence with several policy frameworks developed in Victoria is growing, and in many areas, at a rate faster than that of the general population (Victoria. Municipal Association of Victoria, 2013). At the 2011 census, the total number of immigrants and refugees living in rural and regional Victoria was 77,851, making up 5.4 percent of the general rural and regional population.

Victorian multicultural and family violence policy

At the 2011 census, the Victorian population of 5.4 million people made up 25 percent of the total Australian population and was one of the most culturally and linguistically diverse in Australia. A total of 46.8 percent of Victorians were either born overseas or have at least one parent born overseas, and 23.1 percent spoke a language other than English at home (Victoria. Victorian Multicultural Commission, n.d.). While the majority of immigrants and refugees live in metropolitan regions of Victoria, the number of new migrants living in rural areas of Victoria is growing, and in many areas, at a rate faster than that of the general population (Victoria. Municipal Association of Victoria, 2013). At the 2011 census, the total number of immigrants and refugees from non-English speaking countries living in rural and regional Victoria was 77,851, making up 5.4 percent of the general rural and regional population.

Victorian multicultural policy reflects a positive and open approach to migration and cultural diversity, with various key Victorian documents stating prominently that cultural diversity in Victoria is enriching and highly valued (Victoria. Department of Health and Human Services, 2016; Victoria. Department of Premier and Cabinet, 2016). The Multicultural Victoria Act (2011) mandates that Victorian government departments develop annual cultural diversity plans and report annually to the Victorian Minister for Multicultural Affairs on their progress. Government funded services are expected to be accessible and equitable (DPC, 2016). However, funding is not adequately or equitably allocated to ensure that all services are responsive to immigrant and refugee women in Victoria. There are significant gaps in access to family violence, health, employment and education services (Mengesha, Dune, & Perz, 2016; Treenerry, Franklin, & Paradies, 2012; Victoria. Royal Commission into Family Violence, 2016).

Since 2004, Victoria has undertaken an ongoing process of systemic reform to establish an integrated systemic response to family violence with several policy frameworks developed for prevention and intervention strategies. Over the years, the Victorian government has introduced a range of measures including the implementation of the Family Violence Protection Act 2008; a police Code of Practice for the Investigation of Family Violence; the Common Risk Assessment Framework (CRAF) to standardise risk-assessment practice; Risk Assessment and Management Panels (RAMP) to respond to high-risk family violence; and regional family violence partnerships to drive reform in local areas (Domestic Violence Resource Centre Victoria & Domestic Violence Victoria, n.d.). In February 2015 the Victorian government initiated the first Royal Commission into Family Violence (RCFV). The findings, which were published on 29 March 2016, determined that immigrant and refugee women face significant barriers to family violence services, noting that family violence is facilitated and exacerbated by factors such as immigration policy, social exclusion and isolation, poor interpreting services, and a lack of culturally appropriate support (RCFV, 2016). The RCFV recommended that a 10-year state-wide family violence action plan be developed in Victoria and included 227 recommendations to improve the family violence system, all of which the Victorian government has committed to implementing over the next 1 to 3 years. Of the 227 recommendations outlined in the report, 54 refer broadly to “family violence and diversity”, with eight of these referring specifically to “people from culturally and linguistically diverse communities”.

The Victorian government is in the early stages of implementing the recommendations of the RCFV report, which involves a significant redevelopment of the family violence sector. This will include the development and implementation of 17 Support and Safety Hubs across Victoria which will act as intake centres, as well as a new system of accessible emergency accommodation across the state. In addition, initiatives will be undertaken to reform the police, justice and court systems. The family violence sector will undertake training to enhance its capacity to deliver culturally appropriate services, and efforts will be made to address discrimination within services and improve language services in family violence–related police incidents and court hearings (RCFV, 2016). At the time of writing it is unclear whether the implementation of the RCFV reform will result in an accessible and equitable system for immigrant and refugee women.

Tasmanian multicultural and family violence policy

At the 2011 census, the Tasmanian population of 495,356 people made up 2.3 percent of the total Australian population. Tasmania has a larger proportion of its population (58%) living outside the greater capital city area than any other Australian state, and faces particular socioeconomic challenges arising from being a small economy in transition away from forestry and other traditional industries. Tasmania has relatively low numbers of immigrants and refugees, although there has been a significant increase in the immigrant and refugee population over the last 10 years. From 2006-11, the number of people from a non-English speaking background living in Tasmania increased by over 24 percent. At the 2011 census, a total of 11.6 percent of the Tasmanian population was born overseas and 24 percent had at least one parent born overseas (DIBP, 2015). Relative to its population size, Tasmania is also home to a large number of international students. While the number of people permanently migrating to Tasmania each year is relatively small (approximately 1300), the proportion of this permanent resettlement that is through the Humanitarian Programme is almost three times that seen nationally (Australia. Department of Immigration and Border Protection, 2014). This means the complex and diverse needs
of small and emerging refugee communities are a particularly important and growing consideration in Tasmania.

*The Tasmanian Multicultural Policy* 2014 confirms the state government’s commitment to social cohesion, social and economic participation, and access to services for all people living in Tasmania. The key strategies of the policy include the development of a multicultural access and equity framework across government which is designed to support Tasmanian agencies to deliver culturally responsive services and address service access barriers (Tasmania. Department of Premier and Cabinet, 2014). Intersecting with the Multicultural Policy is the *Tasmanian Women’s Plan 2013-18*, a strategic framework that aims to achieve equality and full participation in economic, social, political and community life for all women and girls in Tasmania (Tasmania. Department of Premier and Cabinet, 2013). While the plan does not have a specific focus on immigrant or refugee women in Tasmania, it does outline relevant actions such as the development of a humanitarian entrant specific website, and a commitment “to review the Tasmanian Multicultural Policy to ensure culturally and linguistically diverse women have opportunities for community participation and leadership roles” (DPC, 2013, p. 18).

In 2004, Tasmania implemented the *Family Violence Act (2004)* alongside the state-wide Safe at Home strategy which takes a coordinated approach to responding to family violence at the policy and practice level across justice, police, and health sectors (Success Works, 2009). The 2009 evaluation of the Safe at Home strategy found concerns regarding a lack of cultural competency among some Safe at Home organisations; problems with the uptake and use of interpreters; and challenges implementing communication strategies about Safe at Home to culturally and linguistically diverse communities. The evaluation made recommendations to address these issues (Success Works, 2009). An internal review of Safe at Home in 2014 stated that recommendations in regard to liaising with culturally and linguistically diverse communities are still hampered by lack of funding for a targeted approach (Tasmania. Department of Justice, 2015). Currently, there is little empirical evidence about how the strategy impacts on immigrant and refugee women, many of whom settled in Tasmania after the inception of the Safe at Home strategy.

In 2015 the state government developed *Safe Homes, Safe Families: Tasmania’s Family Violence Action Plan 2015-2020*, a policy that guides the improved coordination of family violence support services, with an enhanced focus on violence prevention and a strengthened legal response. The newly established Safe Families Tasmania program will include the co-location of officers across relevant government departments to better coordinate justice, police, health, human services and education responses to family violence. Furthermore, a new service called Safe Choices will provide a “wraparound” service to women experiencing family violence, by co-locating various agencies relevant for family violence protection and support into a single unit. Safe Choices is inclusive of immigrant and refugee women (Tasmania. Department of Premier and Cabinet, 2015).

This overview of the national and state policy landscape provides a frame for our research, which aimed to better understand immigrant and refugee women’s experiences of family violence and of help-seeking across a range of geographic locations in Australia, encompassing areas of high and low population density. Our focus on selected sites in two states allowed us to compare the impact of two different policy contexts on service systems and communities and, through that comparison, to clarify structural barriers. While our research has far reaching implications for understanding immigrant and refugee women’s experiences of violence in Australia, it is important to keep in view the different and overlapping policy contexts in which an immigrant or refugee woman might find herself, depending on her immigration pathway and place of residence.
Methods

Theoretical frameworks and concepts underpinning our research

Participatory research

A participatory research approach has influenced the ASPIRE project throughout its implementation. Participatory research is an approach used in social research that involves collaboration with community members affected by an issue to generate knowledge, with the purpose of taking action to improve the circumstances of those involved in the research and ultimately contribute to broader social change (Cornwall & Jewkes, 1995; Green et al., 1995). Participatory research is characterised by a long-term collaborative engagement, ideally initiated by community members themselves, and with a high level of participant control over the research process (Cornwall & Jewkes, 1995).

The research topic examined in the ASPIRE project was derived from the National Research Agenda to Reduce Violence against Women and their Children, rather than one that was initiated by immigrant and refugee women themselves (although organisations representing immigrant and refugee women across the country, including the Multicultural Centre for Women’s Health, had input into the development of the national research agenda). The project also needed to work to tight timelines and across multiple jurisdictions, making adherence to the ideals of participatory research challenging. However, the collaborative spirit of participatory research and participatory processes were prioritised throughout the project. The research team was established through a pre-existing partnership between researchers at the University of Melbourne, the University of Tasmania, and the Multicultural Centre for Women’s Health; a community-based organisation led by and for immigrant and refugee women, with a long history of advocacy, education and research on immigrant and refugee women’s issues in Australia. In addition, the research team used participatory research practices in: holding extensive pre-data collection consultations at all research sites; establishing ongoing consultations with advisory groups in Victoria and Tasmania; engaging with immigrant and refugee women in key aspects of the design and analysis phases of the project; and conducting a Photovoice project with immigrant and refugee women.

Pre-data collection consultations

The research team held consultations with state-wide and local stakeholders in Victoria and Tasmania, including representatives from key sectors such as violence prevention and response, women’s health, justice, settlement and immigrant and refugee services. These consultations provided information about: priorities for research on family violence with immigrant and refugee communities; information about relevant immigrant and refugee communities in each location; past experiences of family violence–related research; feedback about proposed research approaches and tools; and availability of local services, referral pathways and support mechanisms for women and other community members participating in research activities.

Advisory groups

At the initiation of the project, advisory groups were established in Victoria and Tasmania to bring together the perspectives of researchers, practitioners, advocates and policy-makers from relevant local and state-based community and government agencies. The advisory groups included representatives from family violence and sexual assault outreach and counselling services, women’s health organisations, multicultural and settlement services, refugee support services, police and justice services, local government and academics with expertise in the subject matter. Advisory group members provided ongoing consultative support at regular meetings throughout the life of the ASPIRE project, including advice on research methods, design of research tools, community consultations, recruitment processes, analysis of findings, and strategies for maximising the translation of project findings into changes in policy and practice.

Involvement of immigrant and refugee women in design and analysis

Immigrant and refugee women were involved in all stages of the design and implementation of the research. This was made possible through engagement with the teams of bilingual/bicultural health educators (BHEs) at the Multicultural Centre for Women’s Health (based in Victoria) and the Australian Red Cross and Migrant Resource Centre (Southern) in Tasmania, members of whom were trained and employed as co-researchers on the project. Australian research has demonstrated that trained bilingual workers can enhance the quality and reach of research with immigrant and refugee communities (Fisher, 2011; Lee et al., 2014).

BHEs from the Multicultural Centre for Women’s Health and the Australian Red Cross Tasmania were involved in every part of the ASPIRE research project, including initial consultations, research design, data collection, analysis and dissemination.
BHEs played a vital co-researching role as they provided guidance about conducting research with people from similar cultural backgrounds; identified potential barriers to community members’ participation; advised on approaches for sensitively discussing family violence in their communities; suggested appropriate community engagement and recruitment strategies; and participated in the development of research methods and data collection tools. The ASPIRE research team worked closely with BHEs to debrief after interviews and focus groups, translate and transcribe audio-recordings when required, and participate in early data analysis.

Prior to the commencement of data collection, all BHEs in Victoria and Tasmania participated in qualitative research training to develop their skills and confidence to undertake interviews and focus groups. The training program ensured that the BHEs were informed of the aims, objectives and ethical considerations for the project, as well as the requirements of the project’s safety and referral protocols. The training involved collaborative education about family violence where BHEs and ASPIRE research team members shared their knowledge on the topic. InTouch Multicultural Centre Against Family Violence and representatives from Safe at Home delivered sessions in the Victorian and Tasmanian trainings respectively to increase participants’ ability to respond appropriately to any possible concerns that might be raised by potential interviewees.

During the consultation phase the ASPIRE research team also connected with a specific family violence support group at one of the research sites in Victoria. This multicultural group included women who immigrated to Australia from overseas as well as Australian-born women who identified as coming from immigrant and refugee backgrounds or from cross-cultural relationships. The ASPIRE research team met with this unique group on two occasions, once during early data collection and again during the analysis phase. The first meeting provided valuable insight into key issues relating to immigrant women’s experiences of family violence and engagement with services. The second meeting allowed us to seek feedback on our early interpretation of the data, and input on how service and policy responses for immigrant women who experience family violence could be improved.

Photovoice

Photovoice is a participatory and visual research methodology, which involves providing cameras and basic photography training (including training in the ethical issues associated with photography) to community members, and supporting them to record and reflect upon their views and concerns through photography (Wang & Burris, 1997). Visual research methods can generate rich insights into sensitive topics difficult to express in words, and generate compelling data for translation into policy, practice and community-led social change (Canusisco, Weiss, Fruchtmnan, Schroeder, Weiner, & Asch, 2009; Orzanne, Moscato, & Kunkel, 2013; Rees & Pease, 2006). Photovoice, specifically, facilitates safe social spaces for disadvantaged groups to creatively communicate about difficult issues (Vaughan, 2014a; Vaughan, 2014b; Vaughan, 2010), including violence (Chonody, Ferman, Amitrani-Welsh, & Martin, 2013; Frohmann, 2005; Ponic & Jategaonkar, 2012) and resettlement (Sutherland & Chang, 2009). We included a Photovoice component in the ASPIRE project to enable immigrant and refugee women to share their perspectives and priorities through imagery and text, complementing the data generated through in-depth interviews and focus group discussions.

Feminism and intersectionality

In addition to being informed by participatory research practice, the ASPIRE project is grounded in the theory and practice of feminist research. The study prioritises the concerns, voices and lived experiences of immigrant and refugee women, and proceeds from the understanding that issues of gender inequality are centrally connected to violence against women. However, in seeking to understand the specific experiences of immigrant and refugee women, gender alone is an insufficient lens for analysing women’s experiences of violence across different socioeconomic, ethno-cultural, trans-national, generational, geographic, political or other circumstances. By adopting an intersectional approach (Crenshaw, 1991; Sokoloff & Dupont, 2005), the research gives specific attention to the ways in which immigrant and refugee women’s experiences differ from those of non-immigrant women by examining the confluence of individual, social, institutional and immigration contexts and circumstances in which participants’ accounts and experiences occur. While previous Australian studies on this topic have tended to focus on specific cultural communities in localised areas, an intersectional approach to the topic provides a more far-reaching analysis, and has allowed the research team to: 1) identify patterns, shared barriers and common enablers across a diverse range of immigrant and refugee women’s experiences of family violence and gender inequality; 2) provide a more nuanced picture of the way in which women’s personal beliefs, attitudes and experiences of violence are shaped by social, economic and political processes, including public and social constructions of race, gender, place, sexuality, ethnicity, family and class, as well as policy, social and legal contexts, immigration status, citizenship rights and racism; and 3) minimise the risk of essentialising some cultures as more or less violent than others.

Researchers have previously argued that “there is a need to engage our general public culture and institutions that perpetuate social
inequalities and power differences” (Pearce & Sokoloff, 2013, p. 805) in order to address immigrant women’s “intersectional” disadvantage. Various sets of circumstances, including emigration, reception in the migration country, socioeconomic circumstances, racial hierarchies and cultural heritage interact with participants’ experiences of migration, resettlement and family violence. In considering these interactions, we tried to avoid construing the “immigrant experience” as homogenous in our research, while recognising that underlying systemic disadvantage and dynamics of displacement and marginalisation in immigrant communities are relevant for understanding structural and cultural contexts of family violence (Alaggia & Maiter, 2006; Sokoloff, 2008).

Finally, following feminist and intersectional approaches to research methodology and praxis (Hesse-Biber, 2014), the research was designed to support social justice and social transformation. Throughout the research process, we have been careful of the need to negotiate and consider imbalances of power in interactions between participants and researchers, compounded by the personal nature of the research topic, as well as additional and overlapping dynamics of privilege associated with the pre-migration and migration experience, immigration status of participants, language barriers, fear of stigma, and experiences of trauma or post-traumatic stress.

**Data collection processes**

From mid-2015 to early 2016, data was collected in eight research sites in Victoria and Tasmania using a combination of in-depth interviews with immigrant and refugee women who had experienced family violence; key informant interviews with service providers; focus group discussions with groups of men and women from different cultural communities at each site; and a Photovoice project with a small group of women who had either experienced family violence or were actively responding to family violence in their communities.

**Research sites**

The research was conducted in eight geographic communities in Victoria and Tasmania, including inner-city, outer metropolitan and regional sites. The five Victorian sites included: inner north-west Melbourne (parts of the Cities of Melbourne, Yarra and Moonee Valley); City of Greater Dandenong; City of Brimbank; Latrobe City; and the City of Greater Bendigo. The three sites in Tasmania included: inner Hobart; City of Glenorchy; and the City of Launceston. All sites have immigrant and refugee populations, including sites that have seen significant increases in newly arrived immigrant and refugee groups in the last 10 years (e.g. Launceston); sites with long-established immigrant communities (e.g. inner Melbourne); and sites with both established and newly arrived immigrant and refugee communities (e.g. City of Brimbank).

**In-depth interviews with women who had experienced family violence**

A total of 46 in-depth interviews (33 in Victoria and 13 in Tasmania) were conducted with immigrant and refugee women who had experienced family violence. While most of the women interviewed resided in the specific research sites, a small number of women lived in other locations within Victoria and Tasmania. Recruitment was open to other locations in recognition of the high mobility of refugee and immigrant families, and the fact that women experiencing violence often relocate as part of their safety strategy. We were keen to ensure that any immigrant or refugee woman who wished to participate in ASPIRE would have the opportunity to do so.

Interviews were, on average, between 60-90 minutes and were audio-recorded with the woman’s consent. All women were provided with a plain language statement describing the ASPIRE project and had the opportunity to ask any questions about the research and their involvement. Consent forms were signed and collected by the interviewer for confidential storage. Every woman was provided with the option to be interviewed in their preferred language (their mother tongue, English or a third language), and the option to choose the type of interviewer (either an academic researcher in English with or without an interpreter, or a BHE who spoke their preferred language). The interview question
guide explored women’s experiences of violence, help-seeking, use of services, and local supports. Interviewers also completed a short questionnaire with the women to collect demographic information about the interviewee and the primary person who had used violence against them.

The women were recruited through a number of avenues including posters and flyers distributed through researchers, advisory groups and BHE networks; advertisements on multi-language radio programs; referrals from local domestic violence, community health and settlement services; and via connections made in focus group discussions. Recruitment was continued until thematic saturation was achieved.

In the end, the majority of the women who participated in interviews were referred to ASPIRE by family violence, community health or settlement services. This proved to be the most effective mechanism for connecting with women who had experienced family violence and allowed for the generation of rich data. Most of the women interviewed were receiving a high level of support from service providers, were no longer living with perpetrators, and could speak freely and reflectively about their experiences of family violence and engagement with services and systemic responses. However, this also highlights one of the limitations of our study, in that the data may not reflect the experiences of immigrant women who have little or no connection with service providers while dealing with family violence, or of those who continue to live in family violence contexts. That being said, a small number of refugee women we interviewed were supported by settlement services (but had little or no prior contact with family violence services), and most of these women were still living with perpetrators of family violence. Their specific experiences are reflected in the results where relevant.

Interview participants

All of the participants in in-depth interviews identified as women and they identified all of the primary perpetrators as men. There were some women (including siblings or mothers of primary perpetrators) involved in some of the abusive and controlling behaviours in multi-perpetrator contexts. A significant majority (44 of the 46) of the primary perpetrators were partners or former partners of the women interviewed, and the others were identified as fathers (2 of the 46).

Most women were between the ages of 20–49, with the most significant age group being women in their thirties (n=16). None of the women interviewed was over the age of 70. The age distribution of persons women identified as the primary perpetrator was slightly older than the age distribution for women. Most of the perpetrators were between the ages of 20–59. The majority were in their thirties; however, there were more perpetrators in the 50–59 age group compared to women and there were a small number of perpetrators over the age of 70.

The women represented a range of nationalities, cultural groups and religious preferences. A significant majority of women identified as Christian (n=28), followed by Muslim (n=8), with the remainder of the group identifying as Buddhist, Hindu, Sikh, no religion or undisclosed. A large number of the women interviewed were from countries in Asia (n=20), with the majority of this group from Myanmar and the Philippines. The remainder of the interviewees were from the Indian subcontinent (n=9), Africa (n=7), the Middle East (n=4), and the UK or Europe (n=2). There were a small number of women interviewed in Victoria (n=4) who were second-generation immigrants, born either in Australia or New Zealand.
The ASPIRE team interviewed women who were born in Australia, China, Democratic Republic of the Congo, Eritrea, Ethiopia, India, Indonesia, Iraq, Lebanon, Mauritius, Myanmar, Nepal, New Zealand, Pakistan, Philippines, Sri Lanka, Sudan, Thailand, Tunisia, Turkey and Vietnam. Most of the perpetrators were from the same countries as the women; however, we interviewed a number of women who immigrated to marry partners from Australia, New Zealand or Europe. No women from North or South America participated in interviews and the limited number of women from Europe interviewed is a limitation of the study.

Half of the women interviewed (n=23) had lived in Australia for 6 or more years and most of this group were Australian citizens. The other half (n=23) had lived in Australia for less than 5 years and held various visa types. This included women with refugee or partner visas with permanent residence (PR) status; and women with partner, prospective marriage or bridging visas with temporary residence (TR) status.

Most of the bridging visa holders interviewed were complementary protection visa applicants and arrived either as students or as secondary visa holders on the perpetrator’s student visa. One woman had arrived as a political asylum seeker and had subsequently sought complementary protection due to family violence. The “other” group in Figure 2 includes a current student who has not yet commenced changes to her immigration status and a skilled migrant visa holder.

Key informant interviews with service providers

We conducted 46 interviews with a total of 57 key informants (three small group interviews took place). Key informants were recruited through researcher and advisory group networks in Victoria and Tasmania; Family Violence Regional Integration Committees (in Victoria); and flyers distributed via email to local service providers and relevant organisations. All key informants were provided with a plain language statement with information about the ASPIRE project and had the opportunity to ask any questions about the research and their involvement. Consent forms were signed and collected by the interviewer for confidential storage.

Interviews were approximately 60 minutes long and conducted in English by an academic researcher. The interview question guide explored service providers’ perceptions of local service needs, area-level characteristics, barriers and facilitators to community members accessing services, and current community-led responses to family violence.

Participating key informants

Key informants interviewed by the ASPIRE team included persons working in family violence outreach and counselling services, women’s refuges, health services, settlement services, multicultural services, housing services, educational programs, as interpreters, and in the legal and justice sector (i.e. community legal services, court support workers and magistrates). A significant
The majority of key informants were women (95%), reflecting the gendered nature of community service provision. Only a few key informants were from immigrant and refugee background themselves, again reflecting the current workforce.

The additional ethics requirements of state police services and the project’s limited meant that police officers were not interviewed for ASPIRE. This is a limitation of the study, as police are central to the integrated family violence systems in both Victoria and Tasmania. Interactions with the police were frequently mentioned in interviews with women, by service providers and during group discussions with communities. The contributions and insights of police in relation to their specific capacity to respond to family violence issues concerning immigrant and refugee populations would be highly valued in future research.

**Focus group discussions with community members**

A total of 26 focus group discussions were conducted with 18 groups of women (a total of 169 participants) and eight groups of men (64 participants) from different immigrant and refugee communities prominent in each research site. Focus group participants were recruited through community associations, researcher and BHE networks, local immigrant and refugee services, and some groups that already met in relation to family violence (e.g. culturally specific women’s support groups or groups working on family violence prevention initiatives).

Focus group discussions took approximately 90 minutes and were facilitated by a BHE (in the relevant language for participants) or an academic member of the research team where English was appropriate and preferred by participants. For focus groups conducted in a language other than English, an interpreter was engaged to provide simultaneous interpretation to an academic member of the research team who took notes and supported the BHE facilitating the group.

Discussions were held with women and men separately to ensure the level of comfort and confidentiality required to discuss gender-specific topics. The group discussion guide focused on community perceptions and values related to gender, the impact of migration and settlement on family life, access to local services, and violence prevention and intervention in general. Participants were not asked to disclose personal or family experiences of violence in the focus groups, but if anyone indicated they had experienced violence they were provided with information and support after the group discussion and offered an opportunity for a confidential interview.

**Focus group discussion participants**

Focus group participants had immigrated from many of the same countries of origin as the women interviewed for the project, with regional representation from Asia (8 groups); the Middle East (6 groups); Africa (5 groups); the Indian subcontinent (5 groups); and two multicultural groups. Countries of birth included: Afghanistan, Australia, Bangladesh, Bhutan, China, Democratic Republic of the Congo, Eritrea, Ethiopia, India, Iran, Iraq, Myanmar, Nepal, New Zealand, Pakistan, Philippines, Sierra Leone, Sri Lanka, Sudan and Vietnam. Most of the groups included participants who were relatively recent refugee arrivals, having relocated to Australia within the past 10 years. The high proportion of refugee-background participants is reflective of the fact that groups from refugee communities were accessible through settlement services and through BHE networks (particularly in Tasmania). This is in contrast to people who come to Australia as skilled migrants (or on other temporary visas) who may be more dispersed upon settlement, and can therefore be more difficult to recruit in groups for participation in research.

<table>
<thead>
<tr>
<th>Research site</th>
<th>Number of FGDs</th>
<th>Number of participants (women, men)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bendigo</td>
<td>2</td>
<td>16 (16 women, 0 men)</td>
</tr>
<tr>
<td>Brimbank</td>
<td>3</td>
<td>30 (17 women, 13 men)</td>
</tr>
<tr>
<td>Dandenong</td>
<td>4</td>
<td>35 (18 women, 17 men)</td>
</tr>
<tr>
<td>Hobart and Glenorchy</td>
<td>6</td>
<td>48 (31 women, 17 men)</td>
</tr>
<tr>
<td>Inner North-West Melbourne</td>
<td>4</td>
<td>35 (28 women, 7 men)</td>
</tr>
<tr>
<td>Latrobe</td>
<td>3</td>
<td>36 (30 women, 6 men)</td>
</tr>
<tr>
<td>Launceston</td>
<td>4</td>
<td>33 (29 women, 4 men)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>26</td>
<td>233 (169 women, 64 men)</td>
</tr>
</tbody>
</table>
Photovoice

The Photovoice project engaged with ten immigrant and refugee women to generate qualitative and visual data that communicated their views and perspectives in response to the question “If you could say one thing about family violence, what would you want to say?” Some participants were women who had themselves experienced family violence, while others were women who advocated against family violence within their community. The women participated in an initial training workshop where they were supported to generate data in the form of photographs and short textual explanations, which together created photo-stories. Two subsequent workshops were held where the women discussed their images and messages in small groups, identifying shared and contrasting experiences. Participants chose to “speak back” to their cultural and or faith communities, to the family violence response system, and to the wider public through their photographs.

With participants’ consent, some of their photo-stories have been included in this report and will also be curated for an exhibition to be shown at relevant locations in Victoria and Tasmania to disseminate their perspectives and priorities in relation to family violence widely.

Analysis of data

The processes used to analyse data generated in this project have previously been described in the published study protocol (Vaughan et al., 2015b), and are summarised here.

All interviews and focus group discussions were digitally audio-recorded with participant permission. Audio-recordings were transcribed and translated into English (where necessary). Where sound quality precluded accurate transcription, researchers’ detailed notes were included in the analysis.

Initial review of the transcripts utilised a deductive process, based on concepts drawn from the literature on violence against immigrant and refugee women (Vaughan et al., 2015a) and an intersectional feminist theoretical framework. This early deductive analysis of data was completed collaboratively by members of the research team and BHEs in both Victoria and Tasmania during participatory data analysis workshops. These workshops enabled the BHEs to contribute to data analysis and provide cross-cultural insight into emerging themes, which assisted in the development of the data coding frameworks. These coding frameworks were refined based on an inductive data-driven process with codes identified from the empirical material (see Appendix B for the coding frameworks). The entire dataset was coded, and codes clustered into themes identified by the research team. NVivo software was used to manage the process and support organisation of the empirical material. Data coding was completed by three members of the research team, with selected transcripts coded by more than one researcher to assess inter-coder reliability.

The analysis process and early findings were discussed at regular advisory group meetings in Victoria and Tasmania, and during a meeting with the multicultural women’s support group described earlier. This allowed key stakeholders to reflect upon and interrogate researchers’ interpretation and analysis of the data. All data presented during the analysis phase, including during participatory analysis workshops, were de-identified to protect confidentiality.
Research ethics

Ethical considerations

The ASPIRE project was conducted in accordance with the tenets of the Declaration of Helsinki. All participants were informed about the research using a plain language statement, available in English as well as prominent language groups (e.g. Arabic and Vietnamese). Where participants were not able to read the plain language statement, it was read to them in their preferred language. All interested participants were asked to provide written informed consent to participation and publication of findings. All participants were aged 18 years or over and able to provide independent voluntary consent. Participants who were assessed by service providers or the research team as being in the middle of a current crisis or any situation that could be aggravated by involvement with the research were excluded for reasons of participant (and researcher) safety and wellbeing.

The University of Melbourne Human Research Ethics Committee (ethics ID 1544857.1) and the Tasmania Social Sciences Human Research Ethics Committee (ethics ID H0015235) granted ethics approval for the ASPIRE project prior to data collection.

ASPIRE Safety Protocol

It is known that women experiencing family violence are exposed to trauma as a result of the numerous risks to their physical, emotional, psychological, social, and economic wellbeing (Kyriakakis, Waller, Kagotho, & Edmond, 2015). Some immigrants and, in particular, refugees may also carry ongoing risks and mental health effects from exposure to trauma in their countries of origin or in camps and detention centres prior to settlement (Abraham, 2000). Further to this, studies show that researchers conducting fieldwork related to violence against women may also themselves experience vicarious trauma, stress and impacts on their wellbeing (Elsberg & Heise, 2005; WHO, 2001). For these reasons, a comprehensive Safety Protocol was developed to provide guidance on managing risks associated with all aspects of the ASPIRE project, including risks for participants and for members of the research team.

The Safety Protocol drew on existing ethical and safety guidelines for researching women’s experiences of violence (Australia. National Health and Medical Research Council, 2007; Elsberg & Heise, 2005; WHO, 2013). It acknowledged that research in the ASPIRE project needed to be conducted with empathy and awareness, that participants as well as researchers may be vulnerable to experiencing intense emotions through the research process, and therefore safety and wellbeing should always be prioritised. Training was provided to support the research team, including BHEs, to follow the practices set out in the Safety Protocol. Debriefing was conducted with participants and researchers after interviews and group discussions, with optional referral to counselling support resources as required.

Caution was used to introduce the project to community members involved in focus group discussions and ensure that the topic of “family violence” was framed in relation to broader approaches to family wellbeing, safety and migration experiences. This approach was assisted by the rather neutral sounding name of the project, “ASPIRE”. However, participants included in the study were wholly informed about the full scope of the research and about any potential risks of participating or disclosing information (Jewkes, Dartnall, & Sikweyiya, 2012; WHO, 2001).

Focus group discussions and in-depth interview questions were carefully designed to minimise the potential risk of participants becoming distressed. All interviewers were female and trained to minimise participant distress by:

- forewarning participants about the sensitivity of questions;
- reinforcing that participants could elect not to respond to particular questions and could bring the interview to an end at any time, without prejudice;
- allowing interviews to proceed at participants’ own pace (which sometimes involved giving participants the opportunity to take breaks, leave the room, or talk about something else for a period);
- bringing an interview to an end, with participant permission, if the impact of questions became too negative;
- phrasing questions in a non-judgemental manner to prevent women blaming themselves for violence that they may have experienced; and
- ensuring that interviews ended with a focus on the woman’s strengths.

All participants were offered written information about relevant local support and advice services in their local area and were given the opportunity to take information with them or review it to make note of relevant contact details and dispose of the information if this was deemed to be the safest option for them. Where there were language barriers, this information was provided to them either via a BHE interviewer or interpreter. Interviewers were trained in basic safety planning strategies and were also prepared to directly assist with referrals to local services by telephone. In addition, interviewers were trained to understand the reporting requirements in relation to the protection of children in Victoria and Tasmania and these obligations were explained to participants prior to interview commencement.
Results

In this section of the report we present key findings from the ASPIRE study. These have been organised in such a way as to describe the contexts and circumstances of participants’ lives; immigrant and refugee women’s experiences of family violence; help-seeking and services; and possibilities for the prevention of family violence.

Initially we present some of the conditions that arise for women as immigrants. That is, we sketch the political, legal and social terrain for women who come to Australia for various reasons and in a range of circumstances; holding any one of a number of visas, each with different entitlements and restrictions; and who settle in various locations. We then outline the contexts arising from women’s lives as members of families and communities. We show the ways that immigration intersects with the dynamics of family and community, influencing and changing constructions of marriage, household organisation, gender relations and the role of cultural community in people’s lives. We go on to describe the context in which immigrant and refugee women experiencing family violence seek and receive services, and discuss the impact of place on women’s experiences of family violence. Here we provide an overview of the ways in which the policies, practices and services specific to women’s locations come to bear on women’s knowledge of, access to and willingness to seek support. Grounded in our awareness of these contexts, we then describe immigrant and refugee women’s experiences of family violence. This includes participants’ understandings of family violence, the forms of violence they had been subject to, and the consequences of their experiences. We then outline women’s help-seeking behaviours, and their responses and resistance to family violence. We describe how language and communication barriers shape women’s access to information, services and justice. Following this we outline women’s experiences with the family violence service system. The final part of this results section of the report outlines our findings in relation to community initiatives aiming to prevent family violence against immigrant and refugee women.

The immigration context

The immigrant and refugee women and men who participated in this project described a range of circumstances that had brought them to Australia. Some had reluctantly left their countries of birth, fleeing conflict and war, or because of family pressure to emigrate. Others chose to migrate to Australia, seeking economic security and a better future for their children. Across the cohort we spoke to, participants described their desire to make a contribution to the community and build a life in Australia. Even women who had not come here in circumstances of their choosing described their hopes, aspirations and plans for the future.

Focus group discussions conducted with immigrant and refugee men and women highlighted safety and freedom as positive aspects of living in Australia. The women interviewed also often compared life in Australia favourably with what they had experienced in countries of origin and refugee camps. Women valued the relative safety, the education system, Medicare and access to Centrelink benefits. Several spoke about having more opportunities and independence, including financial independence, since they migrated. Some made the additional point that coming to Australia had enabled them to leave violent partners, something they felt would not have been possible in their country of origin.

I like everything because my ex-husband, when we lived in my country and we were married, my ex-husband was no good. Just fighting and hitting me all the time. He pushed me outside all the time. In my country [Iraq] there’s no study, just stay in the home and cook, clean, look after my children. (Dalal)

While keen to emphasise the benefits of migration and living in Australia, community members participating in focus group discussions raised visa insecurity, housing, employment, education, raising children, acculturation, language and communication, and racism as challenges to successful settlement and integration following migration. Focus group participants described immigration as a context characterised by a range of stressors and changes that directly affected communication, relationships and power within families.

Focus group participants noted that adjusting to a new culture, one that was often perceived to give more rights and freedoms to women and children, sometimes strained family relationships.
Male partners frequently resented the fact that Centrelink payments were made directly to women.

[When asked about the biggest change for men, living in Australia] I can say it in a simple way. Power shift. And purely in economic ways. From a cashless woman to becoming cashed. Back home women don’t need any cash in society. They don’t handle life. Here with the system they turn that cash to power. In Centrelink now the mother gets her money and her children’s money. The husband gets only his money. This is a power shift. That’s the biggest change. (Male focus group discussion participant)

For some communities, the obligation to send remittances to family members in source countries was an additional source of pressure and family conflict. Difficulties raising children and a sense of loss of control and culture were prominent themes raised in focused groups. Some groups also discussed fears—both grounded in experience and exaggerated—that police and courts conspired to break up families and remove children.

If there is any argument with the wife and the man, and any problem comes, straight away 000, police come, take the kids, [you have to] stay away 200 metres from the wife. (Male focus group discussion participant)

This fear was associated with a more generalised distrust of police and other authorities, often rooted in bad experiences prior to migration.

Because no matter which part of [my country] you are coming from, police are seen as someone very unapproachable and you try not to involve the police at all in a particular case. We call them the messenger of death…even now if I see a police car my heart skips a beat (Male focus group discussion participant)

Community members described the emotional and financial pressure that visa restrictions placed on families and communities. Bridging visas in particular were a major source of frustration and confusion about entitlements and pathways to future education and employment. Separation from family and a lack of access to family reunion, associated with some visa classes, was a source of distress that made focusing on other settlement issues difficult.

I feel really lonely because all of my family are back home, my sister, my brother, everyone is back home…I get depression when I remember all my relatives, and knowing that I’m so far from them. I am crying day and night because I am so far from them. Maybe if one of them were here, then I could enjoy the beauty of this new country. At the moment, I don’t. (Female focus group discussion participant)

This strain was further intensified for those who were anxious about their family’s safety in countries of origin.

Financial pressures contributed to other settlement problems. The cost and scarcity of housing constituted a major challenge for many, with overcrowding common. Members of immigrant and refugee communities often needed to live in either public housing, more affordable areas of metropolitan centres or in regional settings that lacked transport and other services. In one focus group, participants alluded to the difficulties and associated stigma of living in a public housing estate.

In housing commission, one of the biggest problems is perception. Mainstream Australians think that housing commission is for failing families. Which means people from drug abuse, alcohol abuse, you know, from these problems they end up in housing. Police treat families here without due respect, exactly like failed families. Men are not respected. [But] most of them are religious. Most of them have respect for women. Most of them do the right thing. (Male focus group discussion participant)

Education and employment were a high priority for participating groups. Men in particular spoke at length about the difficulties they had in finding work and the need for more support in this area. One focus group participant highlighted the fact that underemployment and unemployment was a particular issue in Tasmania, exacerbating the difficulties of settling there.

Compared to other states, this state is hard to get a job. Everyone is looking for a job, but the people who have jobs now are only casual jobs. Full time job is hard to get. (Male focus group discussion participant)

Non-recognition of qualifications, underemployment and unemployment were all viewed as major causes of stress and conflict in families. Discrimination was also seen as having a significant influence on individuals’ capacity to find employment and on their experiences in dealing with service providers.

We come to Australia with a lot of experience, a lot of knowledge, a lot of qualifications…I am a post-graduate, I have 30 years of banking experience in senior positions so I came here very happy, “Oh, I will have a good value”, but here you know, when I send my resume for any positions, they find the resume very good but then when they come to know the experience is from [another country], they don’t attach much value to that…I have attended at least two interviews in the city but do you know everywhere “Oh, we are looking for Australian experience, or Australian qualifications”. (Male focus group discussion participant)

Racism, stereotyping and Islamophobia were also identified as substantial stressors for families by a number of groups.
I always if I go to the street someone will abuse me... With me, it happened once. Was daughter sitting next to me. A tall man, a tall woman were crossing on the footpath and I was driving slowly, but I didn’t come close to them. The window was open, I stopped and they turned and they said, “It’s because of the bloody hijab, they don’t see I was walking” and my daughter heard that. I said to her, “This, you will hear so you need to be patient”... I don’t care if they say to me by myself, but I don’t want my children to be treated like that.

(Female focus group discussion participant)

Language and communication issues, as well as negotiating unfamiliar education, legal and justice systems, compounded other challenges. Women in particular, even those who had been here for many years, often missed out on opportunities to learn English, increasing their dependency and poor knowledge of services. Lack of English also posed a barrier to gaining citizenship and associated rights. While men focused on employment-related issues, barriers to learning English and the resulting communication problems were discussed at some length by women in the focus groups.

The only thing they [recently arrived groups] don’t know is English. They cannot communicate. Having a communication gap. And, over here, they have visa problems. They have their difficulties before coming into Australia. They have to face that. They have mental problems. They have families separated from each other. (Female focus group discussion participant)

I had a disabled daughter and I had to take her to the city and speak in English to the doctor... So, that was the time when I felt that I should have been learning English... I am here from 2-and-a-half-years but I didn’t learn English. Because, I try myself harder and harder to learn it but I have other concerns. My visa and my [daughter] because she came here by boat and she is upset mentally a lot and that is why she is struggling to learn English, although she is going to all the English classes. But, she is struggling to learn it. (Female focus group discussion participant)

Impact of pre-arrival factors on subsequent family violence

Women who participated in the study had a broad range of pre-arrival experiences and reasons for migrating that affected their experience of living in Australia. Some women came from impoverished backgrounds; some had no formal education; and others had professional careers and university education, including some with post-graduate degrees.

Many of the participants who had come to Australia as refugees described experiences of trauma and violence prior to migration. A number of the women described being subjected to violence including forced domestic servitude, forced marriage, beatings and rape by their partners prior to coming to Australia. Women reporting pre-arrival family violence migrated in a range of ways, including through the humanitarian stream, or on student or spousal visas. Some described the pressure that was exerted on them by their own families as well as their husband’s families to submit to this type of treatment.

In addition to pre-arrival family violence, key informants described the impact of other forms of violence on some immigrants, particularly clients who had come through the Humanitarian Programme. They encountered clients who had experienced considerable trauma, including conflict-related violence in countries of origin, violence during transit and sometimes on hazardous boat journeys and in immigration detention. This violence resulted in post-traumatic stress and other mental health issues, with key informants discussing the difficulty women had trying to process the different types of violence to which they had been subjected:

If they’ve been in a refugee camp for 15 years prior to coming here, it’s conflated—the violence that they experience in the refugee camp—unrelated to family circumstances but definitely putting pressure on it. Then sitting here talking about their individual relationship. (Family violence service provider, Tasmania)

Some key informants felt that the pre-migration trauma experienced by refugees may be associated with an increased risk of family violence following settlement. While recognising the contexts in which some refugee men used violence against women, service providers did not see this as an excuse for the behaviour.

People from a refugee background have often already experienced displacement, trauma, difficulty. Having been through whatever they’ve been through with those experiences might be a contributing factor to family violence occurring once they get to Australia because say for example a man has experienced torture or trauma, then he might start acting it out within the family. Again, no excuse. (Settlement service provider, Victoria)
In addition to pre-arrival experiences of violence, the reasons women migrated to Australia shaped their settlement experiences, family relationships, and their ability to seek help for the family violence they experienced in Australia. Some women we interviewed migrated because they had married, or intended to marry, an Australian whom they met either in their country of origin or online. A small number of these were arranged marriages to Australian citizens who were themselves first generation immigrants. Other interviewees spoke about deciding to migrate with their spouses in order to provide better opportunities for their children. A significant proportion of the women who participated in this project came to Australia as refugees, either formally through the Humanitarian Programme or as sponsored migrants who were nonetheless fleeing violence or poverty.

A number of women, who described violent behaviours from partners prior to migration, spoke about their hopes that their relationships would improve once they got to Australia. Conversely, a couple of women spoke about a desire to escape family violence as contributing to their motivation to migrate. One woman described managing to leave her abusive husband back in a refugee camp on the Thai-Burma border:

> When he drunk he became very violent. So, my children and I always have to run from the house to my mum's house...I cannot stand this anymore and I always find a way to get far away from him. My mum and my brother and sisters are applying to come to Australia and I asked my mum to include us in the application. The officer accepted our application but not my husband as he did not have a UN ID card and number. But I decided to come with my children because my children will have a better future and educations. My husband did not allow us to go and he accused my mum and my siblings. He cursed or threatened us that “if you go, the flight will crash and you all will die.” I was crying every day and the only things that comfort me is praying to God. By the grace of God I arrived here in Australia, without air crashed and without my husband. (Mu Mu)

Some women migrated with partners as couples on skilled, student or other visas, often with one partner migrating a few months to years before the other. In several cases, women in this situation seemed to have had little choice in the decision to migrate and described being coerced to varying degrees, either by their husbands or their husband's families or both.

At first I didn't want to [migrate] because I had a good job and I had a lot of issues with him...Then I said yes, but I didn't really want to come at the time...We had a lot of arguments and lots of fighting. He would beat me because I would say no. His family put a lot of pressure on me, “if you really love our son you need to come here to Australia to get a better life”. My husband lied to me. We've been married for 14 years, we don't have kids and I want to experience motherhood. I really love children. He said, “We come here and we can make in vitro or things like that can help us to have children.”...I thought maybe if we come here we can have a better life, he will change. We will have kids and that will help him. His behaviour towards me will change because we will have children. It was not the case. (Katie)

In a few cases, a woman's educational achievements and eligibility to study in Australia appeared to have been used by her husband's family as a migration strategy for both him and his extended family.

> [The course] was not my choice because I was a nurse in India but it was my ex-in-laws’ decision. They told me nursing is quite a bit expensive so they just [told] me to go to some very cheap course…They wanted me to come here. I never thought of coming to Australia because I was doing a nursing job after finishing 9 years of study over there, and I was in charge of the nurses in a hospital. It was good for me because I love my profession. Suddenly there came a turning point in my life because in India girls are not allowed to go against the decision of their own parents or in-laws. You can speak but end of the day it's their wish. What's going to happen is their decision…I didn't have any choice. (Jaya)

**Impact of migration status and visa class**

During this project we interviewed immigrant and refugee women who had arrived on a range of temporary visas and as permanent migrants through the skilled, family and humanitarian programs. Family violence cut across all migration streams. Certain visa classes however, rendered women particularly vulnerable to different types of abuse and also shaped their experiences of seeking help and accessing services. Women often had very little understanding of their entitlements, in many instances because perpetrators controlled their access to information, but also due to communication barriers, confusing rules and regulations during application processes, and the challenges of accessing specialist legal advice. Women reported that they required professional support to access their legal rights in regard to immigration status.

> I really can't understand the rules...how can you expect from a person who is new to Australia and already having domestic violence in my life, my husband is beating me every day when I go home and I'm just dealing with a very, very bad life, how can you expect me to learn all the rules and regulations? (Jaya)

For most women, it was not possible to engage a private migration agent due to financial disadvantage and the lack of such services in regional areas. Some women were able to access free legal assistance from specialist agencies in Melbourne such as InTouch...
Multicultural Centre Against Family Violence or the Refugee Immigrant and Legal Centre; however, these services are greatly overstretched, providing support to women across urban and regional Victoria as well as Tasmania, where such specialist services are not available.

Our research highlights how Australian immigration policy impacts on whether or not: women feel safe disclosing family violence to authorities; are able to apply for a new visa to remain safely in Australia; are eligible for services such as Centrelink or Medicare; are able to work or study; and how long women may be without entitlements while waiting for permanent residency. Participants in ASPIRE who were not Australian citizens generally held a partner visa, prospective marriage visa, protection visa, or were refugees who had migrated through Australia's Humanitarian Programme. Some of these impacts also affected New Zealand citizens living in Australia, as the Special Category Visa (a temporary visa specifically for New Zealand citizens) does not entitle them to the same rights and benefits as Australian citizens or permanent residents.

Partner visas

The women who held partner visas reported that they did not have very much interaction with the Department of Immigration and Border Protection (DIBP) until they sought professional assistance to exit relationships with abusive sponsors. Many of the women interviewed who were still in the 2-year temporary stage of their partner visas were able to access the Family Violence Provision (FVP) which allows “certain people applying for permanent residence in Australia to continue with their application after the breakdown of their married or de facto relationship, if they or a member of their family unit have experienced family violence by their partner” (Australia. Department of Immigration and Border Protection, 2016a). They generally reported positive experiences accessing the FVP largely due to the long-term support they received from specialist family violence services who assisted them to navigate the application process.

When I left, I had to apply for my PR [permanent residency visa], so they helped me with that and going to Melbourne and wherever meetings were. I didn't know anything about Australia even in the year I spend with my husband. I was just at home and didn't know how things were done. It was a big thing in my life with the help of [the family violence worker] and I got through it. (Amira)

The key informants who provided this type of support valued the FVP option as it gave them a tool to respond to women's concerns about deportation:

You can see they're panicking about their visas. "I'll be sent back. I'll have to go back. I can't go back. They'll all kill me anyway." With the full intervention order, they don't have to worry about being deported. That's been a good thing for us. We've been able to waylay their concerns straight off. We can say “Hang on, stop for a minute. Don't worry about that because we're in the intervention order court and this is how you can get your exception.” Then they're a bit less stressed when they get there. (Law and justice service provider, Victoria)

While viewed positively, applying to stay in Australia under the FVP involves complex evidentiary requirements, with women needing to be able to prove that the relationship had been genuine in the first instance and that their sponsor had perpetrated family violence against them during that relationship. These are difficult tasks for women with communication barriers, limited experience of the Australian legal system and with a non-compliant former partner.

Prospective marriage visas

Prospective marriage visas are applied for outside Australia so that an Australian citizen or permanent resident can sponsor a fiancée from overseas to come to Australia and marry within 9 months of the visa being granted (Australia. Department of Immigration and Border Protection, 2016b). A woman on a prospective marriage visa who experiences family violence can only access the FVP if she remains in the relationship and marries her sponsor before the visa ceases. Key informants noted that:

If someone comes as a fiancée and if family violence happens, even if they don't marry, the exemption [FVP] should apply in that situation. It's those situations where women leave their country on the basis that they are going to permanently settle in Australia and make very significant decisions and changes at home because of that. (Law and justice service provider, Victoria)

Complementary protection visas

Several of the women interviewed were not eligible for FVP because they either: a) held a primary student visa or were the secondary applicant on the perpetrator's student visa; b) already held a protection visa application as an asylum seeker when they sought help for family violence in Australia; or c) were subjected to violence from a member of the family who was not their sponsor. This demonstrates starkly how differences in visa type construct women's experiences and impact on how they are able to seek assistance for family violence and remain safely in Australia.

For the women interviewed who were ineligible for FVP, their only option was to apply for a complementary protection visa (CPV). The CPV was introduced in 2011 to receive claims from “people who did not meet the refugee definition in the Refugee
Convention, but who nonetheless faced serious human rights abuses if returned to their country of origin or habitual residence” (Kaldor Centre for International Refugee Law, 2015). The CPV applicants we interviewed all faced severe risks in their country of origin because they had ended their relationship and sought professional assistance for family violence. These women became targets of immense pressure and threats, including threats of murder from family and community members here and back home, in political environments where there were few if any legal protections for women victims of family violence. The CPV is the only chance these women and their children had to remain in relative safety in Australia.

When I won the intervention order then someone from the court support service they let me know. They told me that maybe you better get some kind of protection visa for women’s safety. Woman at risk or something like that. Just sometimes I think if a decision doesn’t come out on my side I don’t know what will be happening for my life. My parents will kill me [if returned to country of origin]. My mum will kill me. My brother will kill me. (Jaya)

Key informants noted how difficult it was to support women requiring a CPV because there are few pro bono legal services that are able to handle protection applications, which are very challenging to put together.

You have to be able to show that you fear harm and then if that harm is from private factors, for example, a husband or family, you have to be able to then show that the authorities of their country won’t protect you from that harm. That’s where it can be trickier. It’s really a lot of research about what’s going on in a particular country in relation to the way the authorities are providing protection for women in situations of family violence. It’s a very lengthy and complicated process and for a woman to navigate that herself, especially given she’s in a position of vulnerability and especially if she doesn’t speak English…it’s extremely difficult if she doesn’t have representation. (Law and justice service provider, Victoria)

In addition to proving that family violence is a legitimate reason to make a protection application, women with non-partner visas must also demonstrate that family violence, which is often considered to be contained within the family sphere, makes the woman vulnerable to serious risk anywhere in her country of origin, making return and relocation within that country totally unsafe. According to s.36.2 of the Migration Act 1958 (Cth), “there is taken not to be a real risk that a non-citizen will suffer significant harm in a country if the Minister is satisfied that: it would be reasonable for the non-citizen to relocate to an area of the country where there would not be a real risk that the non-citizen will suffer significant harm”.

This was raised as a particular concern by key informants.

That issue about relocation within a country is really important…you now have to show that you will face persecution or serious harm across the entire country. Previously you had to show that you would be persecuted in the place that you came from and that either you would be persecuted everywhere in the country or that it wasn’t reasonable or practical to relocate. That used to be relied on a lot for women, because women on their own are very difficult to relocate…You must show that you’re at risk of persecution across the country to be owed protection under complementary protection. (Law and justice service provider, Victoria)

Asylum seekers

Women who came to Australia and sought asylum due to political persecution and then also experienced family violence while awaiting their asylum protection claims faced additional barriers that differentiated their experiences from those with FVP or CPV claims. This was largely due to the precarious nature of their existing protection claims and concerns that exposing family violence may result in detention or deportation. Service providers’ engagement with asylum seekers was limited, to the extent that one participant, Wahida, reported that: “We were told we were the first asylum seekers who got to these domestic violence places and agencies. They never had anyone like our case before.” Family violence service providers confirmed that the precariousness of asylum seekers’ status in Australia and the current political climate on border protection makes it challenging to reach out to asylum seekers who are victims of family violence. They also noted that women seeking asylum who experience family violence may be deterred from seeking help from services or accessing the police or justice system, because they fear that this will result in deportations, breaking up families that have struggled to get to Australia safely.

Because of all the prejudice in the media that’s very anti-asylum seeker, and they feel that, so there’s no safety. You know, we say “Oh go to the police.” Well I don’t think so. It’s not safe for them. It hasn’t often been safe in their own country and I don’t think there’s safety here especially when people have been in detention…so there’s less access to safety options for them and the safety options that we just assume are not necessarily safe for these people at all. (Family violence service provider, Tasmania)

One particular barrier noted by key informants was the requirement that asylum seekers sign the Code of Behaviour. “The Code” outlines that those living in Australia must obey the law (which is, of course, a requirement for anyone living in Australia, not just asylum seekers), and not partake in “antisocial”
and "disruptive" activities (Australia. Department of Immigration and Border Protection, 2015b). The Code causes women particular worries in the context of family violence as there is confusion about what might be considered a breach of the Code and the consequences of this:

The asylum seekers have all signed that bloody Code of Behaviour, well they've been forced into signing it… There is a deep seated fear of being put back in detention, of their case failing, and they've got no legal support and every agency that is trying to help them is just completely overwhelmed. It's totally and utterly appalling. (Settlement service provider, Victoria)

Key informants also raised concerns that women who are seeking asylum may not pursue a CPV in the case of family violence, as they may be unaware of this option. When a woman's claim for political asylum has been made as a joint application with the perpetrator, this can present additional barriers for a subsequent application for a CPV.

Where a husband and wife both have claims for protection and the Department of Immigration completely ignore the woman's claims and don't even interview her about those claims or interview them together…the male would say that she doesn't have any [CPV] claims but she may well have. (Law and justice service provider, Victoria)

The bridging visa experience

The women we interviewed who were awaiting outcomes from FVP or protection visa applications held various types of bridging visas, which created a range of challenges depending on the restrictions associated with the particular bridging visa they held. Most women either did not have access to Centrelink, or were only able to access limited funds under the Special Benefit or the Status Resolution Support Services (SRSS) scheme. Some did not have rights to access Medicare, childcare, or public housing while on a bridging visa. Some women were provided with work rights while others were restricted from working, an apparently discretionary difference. These restrictions created significant financial disadvantage and uncertainty about the future as women awaited visa outcomes for long periods of time. Many women reported that the limited rights and lengthy waiting times on bridging visas contributed to feelings of isolation, depression and anxiety.

My visa is a big problem in my life. Now this is just the decision of my life…I just really hope for a decision, that's it. I don't know. Maybe next year. Now it's going to be 2 years… long time to keep on waiting. I've been waiting. Every time if I've got a feeling that the decision is not in my favour I feel suddenly scared. Scared and tired and the world just drops. The time just stops right then. At the same time, I just keep on thinking, “Don't think”; when the day comes, just commit suicide. Until then keep calm. That's how I'm dealing with my mind and my feelings right now. Until that decision comes, just keep calm. The decision should come in a positive way but if it doesn't then just do it. That's how I'm feeling now. (Jaya)

Humanitarian refugees

Women who had arrived in Australia through the Humanitarian Programme had a different set of circumstances. The refugee women we interviewed all held permanent residency and were eligible for Centrelink, Medicare, employment and study rights and were well on their way to obtaining Australian citizenship. This put them in a much stronger position to seek support for family violence than the women awaiting FVP or protection visa outcomes.

Key informants acknowledged that those accepted as refugees are in a good position as far as their permanent residency and access to services is concerned. Refugees also have considerably greater access to information than people on partner or other temporary visas. However, service providers noted that access to information does not necessarily translate to refugee women understanding what family violence is, their rights and how to seek assistance:

People are given so much information; they're bombarded on arrival. There is no way the human mind can process everything that's happening. I've heard a lot of people say the resettlement process is more torturous than what they've been through…I think you can't really do much until they've been here for about 6 months. It's a new landscape, new food, a new language, all of these things they have to negotiate. (Settlement service provider, Tasmania)

A frequently recurring theme throughout this project was the way that precarious migration status was used by perpetrators to wield power and control over women, including through threats of deportation, threats to family living overseas and threats that women would lose access to their children. This will be discussed further in the section outlining immigrant and refugee women's experiences of violence.

Social isolation arising from migration

Social isolation in varying degrees and forms was recognised by both women and key informants as a major contributor to immigrant women's vulnerability to family violence and its ongoing consequences.

The main drawback here is that you don't have family. You don't have anybody to tell, share your problems with. It's
only you two, husband and wife. Sometimes I think when you are only you two here, he is taking advantage that she can’t do anything. She can’t tell anybody. She has nowhere to go. (Karen)

In addition to leaving behind family and friends, recent migration was associated with a lack of local knowledge, language and employment, which increased women’s dependence on their partners. Many of the women spoke about the way in which their lack of English contributed to their sense of isolation, lack of agency and difficulties finding help when they first arrived. They recognised the importance of English classes not only for learning the language, but as a way of becoming linked into new networks and services. Responsibilities for children or differing entitlements associated with visa class often acted as barriers to women accessing language education.

Key informants also spoke about the way in which perpetrators used isolation as a deliberate strategy to control women and ensure that they were unable to leave.

[Some clients have] been isolated in the family home. They haven’t had access to English, they don’t know how to catch a bus, or you know, get out. They know how to get to the supermarket, and how to get to the school and that’s it. And their only contact is with the perpetrator of violence. (Law and justice service provider, Victoria)

Even when women became aware of options for leaving a violent partner, community pressures to maintain the relationship meant the potential loss of their entire community if they chose to leave. Lacking a sense of belonging and fear of even greater isolation compounded the difficulty of making such a decision. A small number of interviewees who had left violent partners in Australia spoke about their complete and seemingly permanent excommunication from family and community both in Australia and in countries of origin as a consequence. In two of these cases, women feared being killed if they returned to their countries of birth for the “shame” they were judged to have brought to their families and communities.

While community ties constrained some women’s options, service providers described women who were on spousal visas, who were often less likely to have community networks, as having the fewest social resources of the immigrant and refugee women they saw.

Yeah, they’re even more isolated. They don’t have the community pressures that people who come as a group experience and that’s huge, but they’re also frequently really isolated and their partner’s got it over them. (Family violence service provider, Tasmania)

Family and community contexts

The centrality of family and community

The immigrant and refugee men and women who participated in our study all spoke about the centrality of family and community in their lives. However, the ways in which they spoke about their roles and place within their families and communities; their perceptions of and expectations around marriage and parenthood; and their beliefs about how central their cultural or religious identity was to their behaviour, social networks and relationships all differed greatly, both across and within the many groups we met. While many people accepted and appreciated the new opportunities that came with migrating to Australia, it was also considered important to maintain aspects of the cultural values and practices of their country of birth. Some of the women interviewed connected their culture with attitudes that were supportive of violence, while others questioned this assumption:

I used to think it was Kurdish. All the Kurdish people doing [violence against women]. But when I get here, it’s multicultural. Power and control. (Anna)

Yeah, because in Maori culture they try and say that family violence is a part of the culture. No. This is made acceptable to be part of the culture. (Marnie)

Underlying these divergent opinions is the recognition that any discussion of “community” will risk identifying immigrants and refugees with a concept of culture that is often arbitrarily defined, wrongly imagined to be homogenous and unchanging, and that simultaneously stigmatises and flattens individuals’ experiences. Among the focus group participants there were generally clear distinctions between the attitudes held by older or younger generations, and between those of women and men. Focus group participants also noted that families within cultural communities each did things differently, held particular values, and raised their daughters and sons in accordance with these values rather than blindly following perceived cultural norms. The variety of perspectives that make visible these differences serves to highlight the ways in which conceptions of community as well as culture were often fluid, overlapping and shifting depending on the speaker and how they located themselves in relation to other people and places.

At the same time, most women and men in our study clearly identified themselves as being part of a culturally or ethnically defined community. Focus group discussions with immigrant and refugee men and women identified many benefits of having social networks and connections with people from the same cultural and religious background. Participants also clarified that groups based on cultural background, like most social networks, were often built on relationships beyond sharing a common source country, such as extended family connections, religious congregation, place of residence, or common interests or purposes such as parenting or education. Community was seen
as a source of both practical and emotional support, particularly for those participants who did not speak English or were very new to the country.

In our community, everyone is very helpful; if one is suffering the others come and they help. If we have any religious function, everybody comes and helps, we get together; gatherings is same as back in country. For functions here, everyone comes together. (Female focus group participant)

In this section of the report, we will examine participants’ perceptions of the ways in which cultural, religious and community beliefs intersected with gender roles and relations, the construction of family relationships and marriage, and women's responsibility for children in the context of immigrant and refugee women's experiences of family violence.

Gender relations following migration

Focus group discussion participants and the women we interviewed spoke about a different set of expectations and behavioural rules operating for men and women, which in some cultures were more clearly defined than in others:

Man is up. Woman is down. Woman cook, clean, bring children. Man can go out, can have fun, can buy, can wear it, can do anything (Celine).

Some participants were able to clearly contrast their experience of gender roles in their source country with what was accepted or necessary in Australia.

My mum always told me to be a good housewife and women need to be good at house work. The men are more like the head of the house and they have more power…When I came here everything was changed. I can go out for work and earn money, I can drive and I can make a decision for myself as well as for my children. (Moo Moo)

Many of the women and men participating in this project perceived that migration was associated with distinct changes in gender relations and roles within their families. These changes were often associated with arguments and conflict arising from the negotiation of new responsibilities.

Once they get a job [the wife], the conflict could be between husband and wife. The household things would change. I cannot look after my house! [laughing] (Male focus group discussion participant)

Participants noted that conflict arising from changes in gender relations and norms could have quite significant consequences. Some of the women we interviewed attributed particular episodes of violence to their male partners’ angry reaction to changes in women’s behaviours or opportunities. A number felt that changes in family dynamics subsequent to migration were the cause of family violence that they experienced for the first time after arrival in Australia.

When we were in the camp, my husband was really good man. He is a hard worker. His money that he earned he gave me all. When he arrived in here, everything changed. He control the money. I would be glad if he use the money in a good way. But he isn't…Coming to Australia has affected my family relationship a lot. (Wah Wah)

Service providers noted that there were also negative consequences for men arising from the major changes in gender relations that took place within some families.

[There is] a lack of employment opportunities and that challenges culturally. It challenges most men because their traditional roles are as protectors and providers. They haven't been able to protect [their families during war]. They're not able to provide. That creates a stress. I know one man committed suicide supposedly as a result of that. At the time his wife had said, “Well you're not my husband; John Howard is my husband because he pays for me.” (Settlement service provider, Tasmania)

Most women participating in the project described changes in gender roles as largely arising because of structural and practical factors (such as women needing to bring in income through working outside the home), as opposed to acculturation or the family consciously adopting Western cultural values. Financial pressures, lack of recognition of qualifications acquired overseas by both men and women, and the common need for men as well as women to take manual factory or seasonal work as a consequence, contributed to tension within relationships. In some instances, women associated this tension with subsequent family violence.

I think it was one problem after the other, and we were having difficulties with finances because I didn't have a job and then there was four of us already...Our finances, and then when he gets home of course I'm already dead tired with two little kids and so it just got piled up and somehow with the kids there was a difference between us. Maybe that started off the fights and caused the friction. (Frida)

However, some participants saw changing gender roles as a product of being exposed to Western culture, and often expressed these changes in generational terms:

In Vietnam, it is unusual for a man to go with his wife to a market and carry bags for her. Many of them didn't help their wives in washing dishes, etc. They have expected a lot from the wives to do all the houseworks...There is an improvement in the younger generation. They have helped and have shared
housework and have had equal relationship. (Female focus group discussion participant)

Men participating in the project sometimes described the changes in gender relations within the family as being due to women and children being “given” more rights in Australia. A number of men described feeling disadvantaged in a context where services were seen to prioritise provision of support to women and children.

They feel like there is no support for men. They feel like it’s only for women. Some men they say, “Oh, first woman, second children and then the dog and then man”. That’s how they feel. (Male focus group discussion participant)

In contrast, several of the women interviewed described how migration had actually resulted in their loss of status, with a number leaving good jobs and professions to migrate to Australia.

I worked full-time in the day and I had a night shift as well when I worked in the clinic. I had all these programs going on and a bit of management and then I worked in the evening. I was earning really good and life was much better. I actually did my first exam to be a specialist in a certain area. Things were going right and then I come to Australia and everything falls down and I have to start everything from the beginning. (Hannah)

In some of these cases, women described their initial expectation that they would be able to continue with their careers following circumstances and a lack of support from partners. In one or two instances, women spoke about their husband’s insistence that they would be able to continue with their careers following migration had actually resulted in their loss of status, with a number leaving good jobs and professions to migrate to Australia.

I was brought up that a husband is like a father and if he says something, you can’t answer back and you don’t respond immediately. He’s like a father figure that you have to obey and you can’t say bad things…When he [ex-husband] came home, I would open the door and he would beat me, but I didn’t answer back. In our culture, even if your father says something wrong, you can’t say it. You can’t talk to your father like that. In most families, you don’t say anything. (Gul)

Expectations of women

Many of the women we interviewed who had experienced violence described rigid gender expectations in their relationships, particularly in relation to controlling behaviours.

I had a very limited world because I was a woman. There was a different set of rules for men. Different set of rules for women. Women were also very constrained within the church environment. (Ruby)

While some women described growing up in families that had championed gender equality, many others reported that they understood what was expected of them as women and had felt obliged to meet these expectations.

All the stuff in the house, I do by myself. I understand he has a job, but [before I arrived in Australia] he told me in this country, men and women are equal. In my country, women can’t speak up. I told him about my culture and he said we [Australians] are equal so if we’re not happy, we’re supposed to talk about it. He said it’s not right that only men can speak up, so I was happy that he said in this country, we have that right…That’s why I was shocked [when the violence started]. (Sara)

Acknowledging the heterogeneity of attitudes and experiences within their cultural communities, some women felt that their views on gender roles and relations were less determined by their culture, and more by their particular family background and upbringing. Some participants emphasised that they had been brought up by parents who loved and respected each other, and where the roles of men and women in the family were different but equally valued. Other women commented on how their mothers expected them to fulfil more traditional gender roles,
with women having less power in the household. One traditional expectation of women that cut across cultural groups was that they should demure to their husbands and parents-in-law:

I would call up and cry and I’d say to my mum, “we got in an argument” and she’d say, “this is men. Just keep quiet. This is the way they are”. I came from the countryside. Maybe the girl in the city is different than me. Maybe they stand up for themselves maybe. I’m from the countryside so the way your parents raised you is different. The way you need to see your mother-in-law is like your own mother, like a duck. My mum always said to me, “Your mother-in-law, you need to look at her like your mother. Even though she may be sometimes bitter or maybe angry with you, just keep quiet.” (Katie)

Women described how patriarchal beliefs about loyalty and fidelity, coupled with the expectation that marriage is for life, perpetuated cultural prescriptions of it being women’s responsibility to work through difficulties in a relationship, which may include enduring violence and abuse:

One of my friends asked me, since we’ve been together so long, why have I still not got used to his temper, pointing out that it was my choice to marry him. So far none of my friends or relatives have suggested I seek help from someone like a marriage counsellor, social worker or seek counselling support. I have no idea where to seek help or strategies to deal with his anger. (Meilan)

The expectation for the wife to the husband is to be loyal and to respect him. Even if there’s abuse. If you’re not happy with the marriage you have to live quietly. Not disclosing it to other people. Always respectful to him even though he has excessive values. Whatever he’s doing, he’s in charge for everything. You don’t say anything and keep quiet and don’t let other people know what is going on inside that house. This is what the expectations of the wife is. That’s why my family they question me because, “You bought shame to us now by doing this.” That was a decision that I made but culturally it’s not appropriate in their eyes. (Odette)

The concept of “shame” was raised by many of the women we interviewed. Women were held responsible for avoiding bringing shame to themselves, their partners, their children and their wider families. Key informants noted that the depth and severity of consequences of shame were extreme.

The importance of the community shame and family shame and what that would mean often meant that women wanted desperately to withdraw their orders regardless, even if they acknowledged “Yes, he might kill me. Yes, we’re at that level of risk”. (Law and justice service provider, Victoria)

She said, “If I continue on this I will never be able to put a foot back in my country because then I will get killed and my kids will get killed including by my own family because the shame is so big”. (Family violence service provider, Victoria)

Figure 3 “Mannequin” by Ruby

Family violence is not always ugly. It can be packaged beautifully like a mannequin. The victims have no voice; as long as they look good then they must be ok. I took this photo because I was once like the mannequin. All my hurt hidden behind an image that suited society. Like the mannequin, I had no voice. My mother before me had no voice. In her generation, women were told, “it is a sin to speak against your husband”. As a consequence, women took their secrets to their graves, exposing another generation of women to abuse.
In addition to submitting to husbands and fathers, being loyal and avoiding shame, participants from across the different cultural communities participating in the project described other expectations of women that were often rigidly held. These included that women would be responsible for all domestic and childcare duties, and that the income a woman earned would be shared with the family rather than spent by her independently. In some cases, migration increased women's load, with women expected to take responsibility for housework, support the wellbeing of children and men, and conduct paid work to contribute to household income.

We have more responsibilities here. You need to guide your family and protect your children, because this is a new society and a new place... It puts a lot of pressure on the mums... It does change [for men too] because if they see you doing most of the work they feel like it’s your job and they rely on you too much. You end up doing everything... That’s when the problem starts. If the father feels he doesn’t have a sense of control. The mother has more control, but it’s in a good way... Back home the role is very clear. Women, their duties are home, looking after their children, looking after the house, and then the father who works outside the house for income. Whereas here, is different. The mother may have part-time work. (Female focus group discussion participant)

Some women who lived with their partners' family on arrival in Australia also found that their care burden increased, and their independence decreased.

Yeah, he said I have to help with the house because I’m a wife now. I have to do what all wives have to do, cooking, cleaning, helping his mother... they were really using me for cooking and cleaning all day. I wasn’t even allowed to go to my room. All day I had something to do. They had lots of kids, his brothers, and they go to work with their wives and they let me look after the kids all day until they get back, feeding them and changing them. (Fatima)

**Family connection and constructions of relationships**

While individual women interviewed could primarily speak about their own family and relationships, or those of friends and relatives, many key informants had a broad perspective across immigrant and refugee communities. Key informants from services working with immigrant and refugee groups noted that family was an especially high priority, and that immigrant and refugee families, including extended family in Australia and overseas, had far more involvement in one another's lives than is common in Western culture and among their non-immigrant background clients. Some women and key informants described cases where involvement of extended family had been protective of women experiencing family violence, with women drawing strength from family support in order to leave a violent partner. In these instances, strong family ties were viewed as a precious resource for women in very difficult circumstances. However, involvement of extended family was far more often described as being to the detriment of women's and their children's safety.

With a lot of the younger women, the ones that have only been here for 12 months, where do they go? What do they do? They've got the family breathing down their neck. Then his family’s contacting her family overseas and they’re giving her absolute hell, "Go back, go back, go back." (Law and justice service provider, Victoria)

A number of key informants working with immigrant and refugee women experiencing family violence described the harms caused by involvement and interconnectedness of extended family, stretching across continents.

[The perpetrator] was contacting the family back home. She had actually made a statement to police of allegations of rape in marriage and he sent that to her brother in [another country] basically saying, “She has dishonoured herself by talking about our sex life outside of the home to the police”… She actually dropped those charges... He was sending things to her family to embarrass her and dishonour her. (Law and justice service provider, Victoria)

Key informants noted that the involvement of extended family in colluding, supporting and perpetrating violence against immigrant and refugee women was challenging to address through existing service systems and required creative responses.

One of the things that especially CALD women face is that we put an intervention order against her partner and stop him from contact but what happens is community members or family members then start putting pressure on her to renege the intervention orders or allow him to breach the intervention orders, and the shame and the pressure comes that way. So quite often at Sunshine Court we had a really innovative magistrate who would put orders specifically that his family in India are not to contact her either because it was so common. (Law and justice service provider, Victoria)

Involvement of extended family was seen as being particularly difficult when the social logic of marriage included extensive financial or transactional connections between a husband’s and a wife’s families. Service providers described the difficulties arising for women experiencing family violence when their marriage had involved dowry, bride price, lobola, or when one or the other family had sponsored visas or paid for student fees.
Financial abuse is very common...even though dowries are unlawful, it is very much there. The abuse of the woman if her family don't continue giving dowry, that is a big thing. I didn't understand that the dowry's not a one-off, that there is [ongoing] pressure on women. They will come here and then suddenly his family will be insisting that her family buy a car for the mother-in-law or whatever. Then she basically gets tortured here if [her parents] don't pay up. (Law and justice service provider, Victoria)

The extension of family violence to financial abuse perpetrated against a woman's family was identified by a number of women we interviewed, who expressed their distress at what their often elderly parents had been put through. The challenges associated with financial and other intertwining of families was confirmed in interviews with immigrant and refugee women from a number of cultural backgrounds. The pressure on women to stay in relationships was enormous when leaving would have had a range of financial (and sometimes residency) consequences for intermarried families.

Some key informants interviewed noted that there was additional pressure and intimacy in refugee families, who had often experienced and witnessed highly traumatic events together; may have lost family members through conflict in their source country or during migration; and may have been separated from family for many years before being reunited in Australia. The struggle that many families had been through to remain together meant it was very difficult for any individual family member to take action (such as reporting family violence) that may undermine or break up the family unit.

[Staying with a violent partner] It's honouring their cultural sense of family, not trying to undermine it because that is their only security. Whether we think it's violent and abusive or not, that is their security. That is the only thing that has carried them through from over there, to a refugee camp, through the racist immigration policies. (Family violence service provider, Tasmania)

Participants in the project had a range of perspectives on responsibility for children in immigrant and refugee communities. Some participants described the importance of fathers for ensuring children's economic and physical security; upbringing, including discipline; and cultural knowledge. Others noted that fathers were often absent from their children's lives. However, women's responsibility for children's safety was a consistent theme.

For immigrant and refugee women, decisions about whether or not to leave a violent partner were complicated if they had children. Key informants observed that all women who have children have to balance concerns about safety with a desire for their children to have a relationship with their father, and that this was not particular to immigrant and refugee women. What was a specific challenge for immigrant and refugee women was the complexity of assessing what “safety” meant for their children, given the potential loss of connection with their entire cultural community.
The service system context

As outlined in the policy background, there are some differences between Victoria and Tasmania in terms of family violence legislation, policy and response. These differences do influence the service system context in which immigrant and refugee women experiencing family violence can access support, and we note key features of the service system context in both states here. However the accounts of key informants also highlighted many similar issues affecting the provision of support to immigrant and refugee women across the two jurisdictions, which are also outlined in this section.

Features of the service systems in Victoria and Tasmania

Key informants in both states described the family violence response in their jurisdiction as “integrated”, but made the key distinction that Victoria provides family violence outreach services and refuges through community-based organisations. In Tasmania these services are primarily provided through government departments, with a limited number of local refuges and grassroots organisations working outside the government sector. As explained by key informants, both models involve referral and communication mechanisms with police, child protection and other services; however, women in Tasmania were much more likely to come into contact with government authorities when seeking support for family violence. Key informants observed that some women, particularly immigrant and refugee women unsure of the consequences of engaging with government departments, may prefer to disclose to community-based services before deciding whether they wish to interact with authorities such as police or child protection. At the same time, it was recognised that the high level of coordination and information sharing in Tasmania may assist in making sure that women and children, particularly those experiencing high-risk family violence, do not fall through service gaps.

In Victoria, women can access crisis assistance by contacting police “000” in an emergency and they may also contact an independent community organisation, Safe Steps Family Violence Response Centre (24 hours), for information and referrals to accommodation and refuge. Women can also contact local family violence outreach services run by various community organisations throughout the state. In addition to responding to contacts directly from women, these services respond to police referrals following family violence incidents. High demand in Victoria often requires that services triage referrals in order to identify women and their children at highest risk or with the most need. At a systemic level, the integration of police, legal, child protection, men’s behaviour change, legal services, family violence outreach services and other specialist supports occurs through a range of mechanisms and governance bodies at a state-wide and regional level. In addition, monthly Risk Assessment and Management Panels that review high-risk cases of family violence were recently rolled out across the state and further changes will be implemented following the Royal Commission into Family Violence.

In Tasmania, the Safe at Home response to family violence operates across the state at both strategic and practical levels (i.e. responding to family violence incidents). Women in Tasmania can also contact police at “000” in an emergency or contact the Family Violence Response and Referral Line (24 hours) for crisis support, which connects them directly to Victim Safety Response Teams managed by Tasmania Police, as well as services provided by the Family Violence Counselling and Support Services. The FVCSS is situated within the Tasmanian Department of Health and Human Services with three regional locations. Weekly case coordination meetings involve a range of services in the Safe at Home response, including the police, the FVCSS, child protection, legal services, offender programs and other services. All parties can view case information in a shared database.

Key informants in both states recognised that risk assessment and risk management often required a tailored response for immigrant and refugee women. In Victoria, service providers use the Family Violence Risk Assessment and Risk Management Framework (usually referred to as the Common Risk Assessment Framework or CRAF) to assess family violence risk, which is similar to the risk assessment used by Victoria Police (Victoria. DHS, 2012). In Tasmania, the Safe at Home strategy includes the police-led Risk Assessment Screening Tool (RAST), and family violence service providers advised that while there is no standard family violence risk assessment in the state, they are informed by the RAST and other tools such as the Spousal Abuse Risk Assessment (SARA) or the Dangerousness Assessment from North America.

Some key informants felt that current risk assessment tools did not adequately address the circumstances of immigrant and refugee women. A number of key informants described how they adapted tools to ask about additional risks such as threats related to immigration, current visa status, financial abuse related to interfamily agreements and obligations (e.g. dowry, joint business arrangements), family or community pressure, and threats from extended family members, including those overseas. Some key informants also described an adapted approach to safety planning, including inquiry into immigrant and refugee women’s own assessment of possible family and community allies, particularly if they decided to remain in the family home.

What I initially focused on is safety and how they felt and how their husband’s behaviour made them feel. I actually had to change my way of discussions to, what do you think your
community would think about this? Who in your community supports violence? Who in your community doesn't support violence? What would they say? How can you talk to them? How could they be inclusive? If you decided to leave, what sort of connections would you have with them? (Law and justice service provider, Victoria)

While key informants in both states had drawn on their professional experience to adapt risk assessment and safety planning processes to ensure these were relevant to immigrant and refugee women, this was not formalised or supported by policy in either jurisdiction.

**Constraints on services**

While there were clear differences in the service system context in Victoria and Tasmania, there were similarities in the constraints under which both systems were operating. Government and community-based agencies providing services to victims of family violence operate in a pressured service environment characterised by high demand, limited funding, and understaffing. In this pressured environment, the intensive support needs that often come with immigrant and refugee women's circumstances, caused by visa restrictions and immigration policy, language and communication barriers, and geographic barriers in regional areas, can be difficult for service providers to address.

High demand on services across family violence, settlement, health, housing, justice and other relevant services for immigrant and refugee women was described by all key informants in all research sites, with particular concerns in metropolitan Melbourne. Key informants described high caseloads, waitlists, and working well beyond funded targets.

I think we saw 1000 clients last financial year, more than 1000, and we are funded for 700. But you can’t say no to the clients who call you. From the time I started 20 years ago until now, the funds have never been increased. We have the same amount of workers and we have to do the same job. (Family violence service provider, Victoria)

Increasing reports of family violence incidents to police and subsequent referrals to family violence services greatly contributes to this high demand, forcing understaffed services to triage their responses to referrals based on high risk and complexity of need. Key informants working in local housing services, especially in urban Melbourne, reported dealing with hundreds of people on priority waitlists, including high numbers of immigrant and refugee women accessing their services due to family violence, including those fleeing violence from interstate.

All key informants in every research site reported insufficient funding to respond to the level of demand. Key informants identified lack of funding as a systemic problem, not just in family violence services and women's refuges but also through their integrated work with under-resourced police, court support, legal services, housing services and child protection. In Victoria, some of these concerns may be relieved by recent funding announcements by the state government following the Royal Commission into Family Violence; however, the impact of these funds on immigrant and refugee women remains to be seen.

Key informants in both states describe a service system context where professionals are often working in short-term, part-time contracts; where there is limited capacity to provide services after hours and on weekends; and limited coverage across regional settings. This contributes to worker stress and burnout, which was reported by many in the family violence sector.

Within this strained service environment, key informants highlighted that providing services to women and children holding temporary visas was a particular challenge. Restrictions on some women's entitlements are a result of federal immigration policy, but have significant cost implications for state-based community services. This is particularly problematic for family violence outreach services and women’s refuges, which are often left responsible for covering the costs of women and children’s basic needs as they await outcomes from applications for permanent residency. In some instances, services reported having to provide support to immigrant women and their children for periods of up to 2 years.

Because of policies and because of the way migrant and refugee women are treated, a lot of pressure is put on non-government services, basically. We worked out, I think, it cost us probably a thousand dollars a week to have her [woman without permanent residency] here. We’re a very small organisation, that’s a lot of money…she was here 10 weeks, that’s ten thousand dollars. (Family violence service provider, Tasmania)

These constraints resulted in high numbers of immigrant and refugee women from metropolitan settings needing to be housed in rural and regional refuges, as refuges in urban centres were unable to accommodate women for long periods of time.

We tend to get quite a lot of migrant women because a lot of refuges have a 6- to 8-week policy. Nobody's residency comes through in 6- to 8-weeks. Nobody’s immigration issues are sorted out in that time; all those issues are frequently very long-term. Currently, we probably tend to get proportionately way more migrant women than somewhere else because we have the capacity to take them and support them until things are resolved, basically. (Family violence service provider, Victoria)

Many key informants highlighted other impacts of women's
temporary visa status on the service system context, noting that they were not trained in immigration-related matters but still must navigate the immigration system to try to find information and provide their clients with appropriate advice. Key informants emphasised that supporting women making an immigration application was very time-consuming, and especially challenging when women had fled dangerous situations without immigration documents, or were prevented from accessing them by the perpetrator in the first place.

We’re not immigration agents but we have to wrap our head around these issues. They come to us and ask what their options are and every visa classification seems to have a different rule and different paperwork. The whole immigration stuff is quite difficult because it’s not part of our training but we’re now probably as good as most immigration lawyers. It’s compounded by the fact that the man has done all the paperwork and initial things, so they [the women] don’t know what their paperwork is. (Family violence service provider, Victoria)

In addition, the extremely limited availability of free immigration legal services makes it difficult for women to access their legal rights. Melbourne-based services such as the Refugee & Immigrant Legal Centre and InTouch Multicultural Centre against Family Violence offer pro-bono migration work. However these agencies are overstretched, working across all of Victoria and also providing occasional support to clients in Tasmania.

Pressures limiting collaboration
The service system context is also constrained by siloed approaches in some settings, which hindered collaboration and communication between services working with immigrant and refugee women. Many key informants identified that non-collaboration is symptomatic of the pressured high demand and under-resourced service environment where they do not have the time to fit in the extra work required to build relationships or manage gaps between services.

Problems with communication and collaboration can also lead to inconsistent responses to the needs of immigrant and refugee women dealing with family violence. Key informants from family violence services sometimes found the beliefs and practices of other services that were not family violence specialists to be highly problematic when they did not appear to have a well-developed understanding of the risks and dynamics of family violence. This caused family violence workers concern, particularly when indicators of family violence were not picked up. Some key informants described instances where non-family violence service providers’ beliefs led to victim-blaming and collusion with perpetrators.

They don’t follow their own policy which exists anyway. I also don’t think they have a very educated, or sophisticated view of family violence, and how to stop it, or how to assess people to work out whether safety really is at risk—so, that, that’s a really big frustration. (Family violence service provider, Victoria)

Other key informants, especially those who worked with immigrants and refugees specifically, felt that some family violence services lacked understanding of the concerns of immigrant and refugee women in regard to their immigration status, the importance of family and community links, as well as their fears of authoritarian responses (which are particularly relevant for some refugee populations). Some key informants from settlement services reported frustrations with family violence services not providing ongoing support to women who did not wish to end their relationship with the perpetrator. While there is an understanding that this limitation is the result of high demand placed on family violence services, there is also a concern that this lets down immigrant and refugee women who would benefit from sustained support from a specialist family violence service while they contemplated their next steps.

It’s not really our job to be an ongoing support to them—it’s sort of a blurring of the lines; we don’t have the training for that—so the best we can do is try to make an effective referral. One of the biggest challenges and hurdles was to actually get the mainstream to pick up their act and provide the care that they’re supposed to provide. That was one of the biggest battles that we are running around here. (Settlement service provider, Tasmania)

Partnerships and co-location of services
In some locations key informants described promising efforts to make the service system context more accessible and responsive to the needs of immigrant and refugee women. These included instances where partnerships had been developed between family violence, multicultural, healthcare and settlement services in order to bridge knowledge and practice gaps. For example, key informants in Tasmania identified collaborative work between family violence and settlement services that sought to address the safety of women and children while taking into account women’s concerns about visas and the existing involvement of community members in managing the perpetrator’s behaviour.

The example I’ve got in mind is one where an offender had committed an assault. It wasn’t seen to be a terribly serious assault, but if he was charged with assault the whole family were going to need to leave Australia. The community took that matter in hand and were transparent about how they dealt with it and stuck with the system, so we were able to
support the courts to understand that this situation had been
dealt with. The [migration and settlement service] were doing
that work and we were working with the victim around her
safety. We were then able to help the courts to understand
a situation that didn’t just make it worse for every member
of that family. (Family violence service provider, Tasmania)

Such developments could provide helpful solutions for immigrant
and refugee women in certain situations. However some key
informants were cautious about services collaborating with
community leaders, noting the importance of always prioritising
women and children’s safety above cultural expectations of
women’s role in the family and community.

We have had some examples where community groups
may be involved and may be working in a way that’s maybe
unsafe for the woman, particularly around trying to mediate
the family situation and reconcile the family. That’s fine. No
one wants to split up families, but if it’s not safe for her, that
may need to be done...she needs to be given options. We’re
very cautious. (Law and justice service provider, Victoria)

The co-location of family violence services with services from
the law and justice, housing, settlement, health and other sectors
was also seen as a valuable development that strengthened
communication and collaboration between workers engaging
with immigrant and refugee women experiencing family violence.
Key informants from the family violence and legal services in
particular described a range of outreach “pilots” where they
spent time working out of other locations such as community
health centres, schools, courts or Centrelink. Specific co-location
programs such as the Neighbourhood Justice Centre (NJC) in
Collingwood, Victoria, and initiatives such as the health justice
partnerships were seen to be particularly beneficial for immigrant
and refugee women. Key informants described the NJC as a
setting where professionals from different sectors could share
skills and knowledge, seek advice and consultations, co-support
clients, and collaborate on safety planning and referrals. This
prevented immigrant and refugee women from falling through
the gaps between sectors.

I think NJC’s beautiful for the fact that it’s not only a one stop
shop, but you get a lot of education from the other workers.
Sort of what they need for a referral, what’s important to sort
of fill them in on. So yeah, that’s the dream. (Family violence
service provider, Victoria)

Health justice partnerships are based on a US model that brings
together healthcare, legal and social services to simultaneously
address clients’ multiple needs (InTouch Multicultural Centre
against Family Violence, 2015). Health justice partnerships
were discussed by key informants in several research sites. The
Dandenong model, which has a specific focus on immigrant
and refugee women through a partnership between InTouch
Multicultural Centre against Family Violence, local health and
legal services, was particularly highly regarded.
I was woken up one morning with the sound of storm and strong winds, as they battered my bedroom window. The wind was blowing and trees were violently swaying. I visualized the lives of many women who are going through family violence. The intense feeling took me to my balcony to witness the commotion. Amid all the turmoil and chaos, a golden ray of sun trickled through the trees. It was the first light—new beginning, a new day and a golden life after a storm. Among the darkness and turbulence comes a “ray of hope”. How else I should put it except in the words of Jill Eisnaugle:

Through each moment, indecisive
Is a glimpse of what can be
When our rays of hope, incisive
Shine their light, eternally
So that we may all continue
To thrive with the means to cope
Regardless of life’s harshest venue
Bound within our rays of hope.
Place-based contexts

Our focus on place in the ASPIRE project revealed the various ways women's specific geographic locations impacted on their experience of family violence and access to services. There were clear differences in the experiences of women living in greater Melbourne and those of women living in rural or regional areas, including in the Tasmanian sites. The experiences of women interviewed in regional Victoria had more in common with those found in Hobart, Glenorchy and Launceston than those in Melbourne.

That being said, focus group participants living in Melbourne remarked on the differences between areas of the city with an established history of migrant settlement and areas (often on the rapidly-expanding urban fringe) where visible cultural diversity was more recent, and where transport and other services were often inadequate.

Perceptions and preferences

Participants also made geographic distinctions between “here” in Australia and “there” in the countries in which they were born, as well as between “here” in rural areas and “there” in metropolitan cities. Focus group participants and women interviewed had a range of preferences for either living in a multicultural environment, with people from their own cultural group, or away from their “own community”.

In my country, I didn't feel safe. The differences here are that people are kind. The organisation helps and supports us to use free classes. The good thing about Dandenong is it's a multicultural place. I feel safe and happy here. I always catch up with my friends and when working, I feel like I'm working in my country. Everyone says hello and it's a really good thing for me. (Male focus group discussion participant)

These distinctions not only made visible the different ways participants located themselves in relation to other people and places, but also drew attention to how women’s notions of “community” are tied to place. Overall, women's preferences for settling in either a regional, rural or an urban location related to desires and perceptions about community, social inclusion, safety and the availability of services.

I like this suburb and even though my work is in Brunswick I don't want to move from here. It's a peaceful, quiet area. I don't know why people have this assumption that the western suburbs are not good. For me this is best and I really enjoy it. All the local communities, whatever I use, it is all available here. I don't have to drive very far, except at work. For the kids it's really good schools in the western suburbs too. I am happy with my western suburb. (Female focus group discussion participant)

A number of women interviewed spoke about their preference for living in a community with cultural diversity where they did not feel out of place. This consideration extended to the comfort of their whole family, as one participant, Marnie, highlighted when she remarked: “It's probably more for the children...it's a multicultural community and the children and I like that because they feel that they're not the odd ones out.”

In addition to those women who preferred a multicultural environment in general, a number of women, from different ethnic backgrounds, spoke about wanting to live in areas where there were significant numbers of people from their own cultural group. Others held the opposite view and wanted as little contact as possible with members of their “own community” (with some of these women having moved to achieve this). This latter position tended to be associated with women's experiences of violence within their community or a desire to avoid judgement and gossip. As Dalal remarked: “They look at you and say, ‘You're divorced? When you came to Australia you divorced quickly,'”

One woman also made the point that living in an area with only a few tight-knit families from your own cultural background magnified the risks and effects of ostracism for women attempting to leave relationships in which they were subject to violence.

They start criticising and they try to bring me down. Once they get to know you they try and get abusive and I'd rather not go there. Because I've been here for a while now I'm all right. At the start I had to keep my distance from them. (Frida)

The women interviewed had contrasting preferences for city or country life. Some enjoyed the perceived friendliness and safety of a regional town compared with the city, while others preferred a city location for its relative anonymity and associated privacy. There were a number of reasons cited by participants for settling in regional and rural locations, including immigration policy, which sometimes settled humanitarian entrants in specific regional towns and also in Tasmania. Other incentives included more affordable housing and availability of employment opportunities. Sometimes the latter were seasonal, adding to the transience of the migrant population and making the establishment of local ties more difficult.

I would imagine that that was just another layer because through this region there will be seasonal work. There could be some transience as well, so moving around following the seasonal work but also the limited public transport. Being completely reliant on their partners for access to anything, so access to go shopping, access to see a doctor. Once you get out into your rural areas your public transport is a major issue for women to be able to get from one agency to another. (Family violence service provider, Victoria)
Another quite common reason that the women we interviewed had for residing in regional locations was that they had been relocated to a refuge in a regional centre by police or family violence services. In some instances, women reported that they were moved from an area where they were known and more likely to be in danger to a regional setting. As described earlier, regional refuges sometimes had the capacity to let women stay for longer than would be possible in a city refuge—an important consideration for women with uncertain migration status and a corresponding lack of access to other services and supports (in some instances, no income or assets at all).

So, they're referred to a refuge that the perpetrator would have no ties to or reason to visit. So, we get a lot of women who come up from Melbourne, and that's where most migrant women start from. Like I said, it's partly because we're a fair way from Melbourne and also, we don't have a restrictive policy, so we can take those longer-term clients. (Family violence service provider, Victoria)

Some of these women then chose to settle in the regional community they had been relocated to, even after they had left the refuge.

It's a nice sized town that's big enough to give them what they want but small enough to feel manageable...They establish friendships, get other support networks that aren't culturally based but more to do with children in the same school or same church. So, a lot of women choose to stay here because they have supports and contacts in this community and they feel safe. They've started life again and if they went back to Melbourne, they'd be starting all over again. (Family violence service provider, Victoria)

Regional refuges often provided extensive ongoing support to women as they settled in the local area. In doing so, these small services were required to attend to immigrant women and children's housing, education and employment needs as they went through a form of intensive secondary settlement.

Interestingly, a huge number of migrant women do settle here because there's that ongoing support and relationship and they get to know the area and do establish friendships and networks. We stretch funding and call in favours, so we put women through TAFE courses to get qualifications in various areas. We pay for English courses and help them get driver's licences. We really work incredibly hard to not just stick a Band-Aid on but help them get on with life. (Family violence service provider, Victoria)

While some immigrant and refugee women we interviewed preferred regional life, there were also many perceived disadvantages of living outside a big city. Both women and service providers spoke about the way in which geographic isolation tended to compound social isolation in rural and regional areas and intensify women's dependence on their partners and lack of access to amenities.

Maybe the transportation. I didn't know how to drive and we were living in an isolated area. It's very hard for me. (Pocahontas)

Regional locations were generally compared unfavourably with Melbourne in terms of availability of facilities and services for immigrant women. Key informants, women and focus group participants spoke about the absence of mosques, Halal butchers and other culturally appropriate foods in these less diverse settings. A lack of specific immigration and interpreting services also increased the demands on family violence support workers.

It's geographic. There's no migrant services...so for them to see their migration lawyer or InTouch, they need to go to Melbourne. A lot of them aren't good at public transport, so we often drive them or go on the train with them [a round trip of around four hours]. We facilitate the process so we're physically there to advocate for them. (Family violence service provider, Victoria)

Impact of place on access to family violence services

An analysis of place also extends to the state-based context of local arrangements for family violence services, which are important to understand in relation to women's pathways to services. There was variation across study sites in the types and range of services that were available to women, particularly in Victoria, where different kinds of community-based organisations were funded to deliver family violence services. There were also varied referral pathways linking women to resources, depending on the location of their initial contact with the family violence service system. Service philosophies, funding agreements and other factors presented differing possibilities and restrictions on the circumstances in which women could access services. For example, the majority of services were designed to support women who had made the decision to leave a relationship; more rarely, services were prepared to support women who continue to live at home with perpetrators, and this option was not available across all the research sites.

Some study sites, such as the Cities of Greater Dandenong and Brimbank had large immigrant and refugee populations and dense networks of family violence, migration and resettlement, and ethnospecific services. Women living in these places could potentially access a broad range of services locally, but it was evident from key informant interviews that there were not always strong channels of communication or other linkages
between the varied services, with communication gaps between the family violence and settlement services sector identified in particular. In regional Victoria and Tasmania on the other hand, fewer services covered large areas with dispersed populations and relatively small immigrant populations. Women living in these settings had few choices about the services that they could access, however in some instances the limited number of agencies involved improved communication within and between sectors.

We have an action plan that we visit yearly. One of the action plans is for us [family violence service] to have that communication channel with them [multicultural service] and continue networking. We had a meeting with them the beginning of this year... They're located just behind us as well. In the country, it's who you know. (Family violence service provider, Victoria)

Key informants spoke about the cooperation between services in regional towns that was facilitated by service providers all knowing each other. Service providers perceived that this meant they were more likely to help each other, and that they had less fear of being swamped by demand as might be the case in the city.

Across sites, key informants identified a range of ways that immigrant women accessed help, whether this was initiated by women themselves, police, service providers or friends and family. It is important to point out that where women had direct contact with local services (not necessarily family violence services), this often facilitated their access to the family violence service system. Place-based support services and programs such as educational institutions, healthcare services, local council child care services and maternal and child health services all played a role in brokering women's initial contact with a family violence service.

Key informants and the women we interviewed highlighted the co-location of services, including family violence and community legal, health and other services, as a promising place-based feature with particular benefits for immigrant and refugee women.

Displacement

The analysis of place also revealed that immigrant and refugee women's relationships to place are often put into crisis, disrupted and complicated through their experiences of violence, help-seeking and leaving perpetrators. Interviews with women and with key informants confirmed that immigrant and refugee women often experienced multiple levels of displacement throughout their experience of family violence.

Service providers associate loneliness with depression. I had no time for depression; I needed to survive. For me, loneliness is expressed perfectly by Kim Culbertson: “People think being alone makes you lonely but I don’t think that’s true. Being surrounded by the wrong people is the loneliest thing in the world.”

I remember once thinking, “how could I express my situation to a service provider who had limited or no cultural understanding?” Things have not changed much in country areas today.
Beyond the obvious physical relocation associated with immigrating to Australia from another country, women experienced emotional and psychological displacement from the social networks and routines of their home country. In the case of refugee women, this relocation was forced and sometimes tied to traumatic national displacement. Other women interviewed expressed ambivalence about immigrating and had frequently been pressured to immigrate; had immigrated as an expectation or condition of marriage; or had other complicating circumstances that made it unclear whether their relocation was freely chosen.

While some women reported feeling trapped in their location by economic hardship, dependence on family or by a perpetrator’s isolation tactics, many women described moving around a lot, sometimes because of the perpetrator’s behaviour, sometimes in progressive attempts to leave. Many women were now living in regions far from where they believed the perpetrator to be, or had spent extended time overseas as a temporary measure to escape violent periods.

Many women had experienced excommunication and dislocation from their community when they chose to leave as well as physical displacement, not only from the perpetrator, but often from the only social connections they had in Australia. Some women were separated from their children. Many women were forced to move several times in a year in order to be kept in refuge. Many had to give up their jobs and other connections that might put them at risk from being found. Women without access to Centrelink or other forms of income often had little control over where they lived and the frequency of their displacement.

In 2 months we were moved [between crisis accommodation and refuges] eight times. With no job, no money and no support...After 4 to 6 weeks they found a place for [other women in the refuge] or the family and then they’d move out and they’d live in a place on their own, their own apartment or something. Our case was different because we were asylum seekers. (Wahida)

Disruption to women’s lives and dislocation from their homes was a common theme in women’s interviews. The need for women to physically relocate, sometimes to areas that were entirely unfamiliar, was common. Through these (repeated) relocations, women were sometimes dependent on family violence services that were not adequately resourced to meet immigrant and refugee women’s specific needs, including addressing issues of displacement, ostracism from community and social isolation.

Women’s experiences of family violence

In this section we outline findings in relation to what immigrant and refugee women understood to constitute family violence; the forms of violence they had been subject to; the trajectories of violence in women’s relationships; and the short and long-term consequences of family violence that immigrant and refugee women described.

Women’s understanding of what constitutes family violence

They do advertise it [on the radio]. The broadcaster says, domestic violence, it’s كورساري (aleunf al'asri) in Arabic, but that’s it. If you hear it you think, okay, what does that mean? An argument with your husband or physically or verbally? What does it mean? (Lucy)

To me family violence was broken arms and black eyes. It is so much more than that. (Maddie)

Women interviewed and focus group participants had various levels of understanding and awareness about what constituted family violence, which often reflected their personal experiences of family violence, their level of interaction with support services, and their distance from their experiences. While there was a focus on physical violence, many other forms of abuse were also identified, including verbal abuse, financial abuse, emotional and psychological abuse, intimidation, controlling behaviours and imposed social isolation. The women interviewed less often specifically identified sexual abuse when defining family violence, and only in the context of their own experience. This does not necessarily indicate that they did not consider sexual violence to be family violence, but may reflect how difficult many women find it to talk about.

That type of stuff, that is not normal behaviour to want to kill someone or to use the sexual organ as weapon…A lot of women are afraid or ashamed to speak about that area. That’s what I’ve noticed. If women share that with you it means that you’ve developed a very deep level of rapport because that’s an area of shame and embarrassment. It’s very personal. Very, very personal. (Family violence service provider, Victoria)

Several key informants also noted that immigrant and refugee women did not readily identify sexual violence, perhaps in part because of the difficulty of discussing the issue through interpreters, but also because of limited understanding about what was and was not acceptable; perceptions that it was a strictly private issue; as well as perceived or prescribed religious, social or familial expectations of gender or marital roles.

Men I encountered in a behaviour change group, a lot of their sex knowledge was driven through porn and the internet, so they were demanding that their wives do more
and more in the sexual arena and women didn’t know to ask if this is normal or not. “I don’t want it but I don’t know if this is expected from me as a wife.” (Law and justice service provider, Victoria)

Although many women interviewed had broad and nuanced understandings of what constituted family violence, a significant number also recalled that at the time they were experiencing violence their knowledge was limited.

It was like this very long abusive relationship. I didn’t even know until I got my first court order that this is abuse. (Karen)

When he started I wasn’t allowed to talk to anyone. Not even housemates. So I never talked to anyone and I did not know that, you know, it’s bad. Beating your wife is not OK. (Ella)

Some women interviewed, particularly women who had immigrated to Australia as refugees and who were recruited to the project through settlement services (rather than family violence services), still had very limited understanding of what constitutes family violence in Australia, in a legal sense or otherwise. However, many of these women also identified violent behaviours as being unacceptable.

Violence is violence. A violent person is a violent person everywhere, so it’s not about the culture or religion; it’s human. So, it’s not as a Muslim, Christian, Jew or Arab or European. There are some things that are not accepted as a human being. Whatever your religion, morals or ethics, wrong is wrong. (Amira)

Yes, the language might be different but the experiential sense of not being treated well…that experience of it I think, is transcultural. (Family violence service provider, Tasmania)

Information that immigrant and refugee women lacked frequently related to terminology, knowledge of their rights and the ways in which they could act upon them.

To me, domestic/family violence is a new term as I do not have any knowledge of this area. I thought in my life I would get a good and caring husband but I never did…I do not know anything about what the law says about family violence in Australia but I think there might be shelter for the women and the women may have rights…I have experiences with physical abuse, emotional abuse, financial abuse and verbal threats all the time in my life with my husband and it’s always make me scared. (Mu Mu)

Immigrant and refugee women and service providers agreed that what women and what men from different cultural communities understood to be family violence was not always the same, or consistent with Australian law.

The thing I also see is that men themselves don’t even know of their actions. They don’t see this as violence. They still think that there is no such thing as a sexual assault to your wife. They never see that because they think it’s up to them. “She’s my wife.” I’ve heard a lot of men say, “Look at this, the Australian government saying this is violence if you do this. This country is very strange. How can I sexually assault my wife?” (Hanna)

The big issue is back home if I want to use [have sex with] my wife I can use any time, no problem. She accepts whatever. In here, you have to get permission. That issue is very hard to deal with. The problem starts from here. (Male focus group discussion participant)

Key informants’ observations about women’s understandings of violence varied widely, though there was general consensus that immigrant and refugee women’s understanding of family violence was often limited and that this contributed to women staying longer in abusive relationships. While some service providers reflected that Australian-born women’s understanding of family violence was probably similarly varied, others attributed immigrant and refugee women’s limited understanding to a range of factors including: the normalisation and minimisation of violence in women’s home countries; misinformation from perpetrators; rigidly patriarchal social, religious or familial expectations of women’s roles; and women’s lack of access to timely or appropriate information and education.

Some service providers talked about how they struggled to disentangle rigid socio-cultural expectations from the controlling behaviours of perpetrators. As one observed:

I think [women’s understanding of violence] would be limited, in that getting hit mightn’t even be identified as family violence. It might be just identified as something that happens in the family and wasn’t really that bad, so it can be minimised. Because the women have often come from quite patriarchal societies, it’s not an expectation that they’re going to be financially independent or educated or live independent lives. (Settlement service provider, Victoria)

However, others emphasised that women’s lack of understanding related less to what constituted family violence and more to what services were available, what rights they had and how to navigate Australian service systems in general.

I don’t think they all understand what family violence is in the Australian context, but I don’t know that all Australians understand. In terms of the law, there are stringent laws in Australia, if they’re followed, and there are checks and balances in place, so that’s all new. That’s a learning curve for people. It’s quite reassuring for lots of women to have all that but they...
Some key informants working in Tasmania questioned whether the current definition of family violence used in the state (which equates family violence with intimate partner violence) was inclusive enough to encompass immigrant and refugee women’s experiences of violence. They noted that intimate partner violence often overlapped with other experiences of violence, including violence from other family members or before migration in humanitarian contexts.

That’s a little bit of a reflection on our definition of family violence and intimate partner violence. It’s very heterosexual, it’s a relationship between a man and a woman in a domestic setting and that’s written into our understanding of it. But when the violence and abuse is happening across multiple layers and it’s that intersectionality with different violences happening across different places, they’re not isolated from each other, they interconnect. (Family violence service provider, Tasmania)

Key informants who worked regularly with women from refugee backgrounds suggested some women were desensitised to violence through their pre-migration experiences, particularly if they had spent time in refugee camps, and would not necessarily recognise family violence as violence. While women from refugee backgrounds are given information about family violence early on, this may be difficult to take in among priorities such as housing, income and family stability for their children. On the other hand, many key informants noted that women living in Australia on spousal, partner or other temporary visas had very few opportunities to access information about family violence or the law in Australia, and may be heavily dependent on their sponsor. This was perceived to leave temporary migrants especially vulnerable to misinformation and isolation. This was a particular concern for many key informants working and living in regional areas, who were aware of many women living in the area on spousal visas and recognised that geographic isolation further compounded the isolation from services and information that these women may experience.

**Forms of violence experienced by immigrant and refugee women**

The 46 immigrant and refugee women interviewed in this study reported many different forms and scales of violence and control from perpetrators. Forms of violence reported included: many types of physical violence, including physical violence leading to hospitalisation; sexual violence, reproductive coercion and violence related to pregnancy; financial abuse; emotional and psychological violence; controlling behaviours including surveillance, threats and intimidation and misinformation; humiliation and shaming; domestic servitude; abuse of systems including vexatious litigation and behaviours, such as filing meritless cross-applications, threats relating to the custody of children, delaying proceedings and withholding information; and enforced social isolation, including imprisonment.

The women interviewed reported having experienced these different types of family violence regardless of their religion, age, cultural background or country of birth, and most forms of violence that women reported have also been documented among non-immigrant Australian women. Nevertheless, some characteristics and types of violence described were particular to their specific circumstances as immigrant and refugee women. Specific behaviours included violence perpetrated by extended family members or multiple perpetrators; immigration-related violence or immigration-related coercion, including threats of deportation (often without their children) and visa cancellation; withholding women’s access to immigration documentation and information, including passports; violence perpetrated or supported remotely, including by relatives living overseas; and threats made against family living overseas.

Immigrant and refugee women also provided many examples of perpetrators capitalising on, manipulating or benefiting from their lack of information about and access to support services, and their limited knowledge of their rights and the law. A number of women described being discouraged or kept from improving their English, and perpetrators preventing them from accessing English classes. Women also described experiences that involved humiliation or shaming based on their race or religion, most often (but not always) in situations where they were in relationships with Anglo-Australian men. Although most reported abuse was perpetrated by women’s male partners, descriptions of violence also included incidents involving fathers, siblings, members of extended families including parents-in-law and partners of siblings, and children. Some women reported physical violence perpetrated against their children and children’s exposure to family violence in the home or elsewhere.

None of the women reported any one form of violence occurring in isolation. Multiple forms of violence were used against women at the same time; for example, physical and sexual violence was accompanied by verbal abuse, often in a context of extreme social isolation.

**Physical violence**

Specific forms of physical violence used by perpetrators included: pushing; hitting; punching; beating, sometimes with household objects; choking or strangling; throwing, sometimes against walls;
or hard surfaces; slapping, often around the head or face; burning, with cigarettes or stove tops; twisting; shaking; spitting; pinching; breaking bones; kicking; cutting with knives; dragging, in most instances by the hair; pinning women down; locking women inside the home, or outside the home overnight in winter; and throwing or breaking household objects, including windows. In many cases, women’s experiences of physical violence were not isolated but recurrent throughout the course of their relationships, which ranged in length from 1 year to 3 decades.

When I was younger, teenager, he used to hit me and all that, do all that sort of stuff and throw things, cigarettes, punch, pinch, strangle, kick, whatever. Then as I got older, when I told him, when I start telling the police, his main thing is being exposed. Then that eased off. The kicking and the strangling. Then [he] just pushed me all the time. A lot of shoving and all that sort of stuff, because he said “well you can’t say [anything], cause that’s not domestic violence, it’s only if I smash your face in”. (Marnie)

While the majority of women reported physical violence perpetrated by their husband or, more occasionally, male intimate partner, some women reported physical violence from other family members, including fathers, brothers and sisters-in-law. One woman who was seeking asylum in Australia reported that her father was physically abusive towards her mother, sister and herself. Another participant described her experience of being made to sit on the carpet while a group of people including her sister-in-law, brother-in-law, husband and occasionally their friends sat around verbally abusing, slapping and spitting on her. Several key informants also reported having encountered cases in which physical abuse was perpetrated by family members other than male intimate partners, including brothers physically abusing their sisters or policing their sisters’ behaviour, adolescent males controlling or abusing their mothers and siblings in the absence of a father figure, and older women physically assaulting or abusing younger women.

The sons are often a problem because they’re taking dad’s side…Because a lot of the fathers were killed in [war], it’s the sons who are the perpetrators, because they then step into dad’s shoes…They’re telling their siblings what to do. We have a lot of sibling issues where the brother has now taken on dad’s role and he is now beating up the 16-year-old sister. (Law and justice service provider, Victoria)

In the context of their own experiences of family violence, women occasionally reported having witnessed instances of physical abuse perpetrated by men in their family or lives against other men in their family or lives, including abuse between fathers and brothers. Two women who were interviewed also disclosed that their children had been hit or beaten by perpetrators.

Sexual and reproductive violence

A number of women we interviewed reported they had experienced sexual violence. Experiences of sexual abuse that women described included rape; harassment or pressure to have sex; and sexual cruelty or sex which caused women pain and suffering. Several women also reported reproductive coercion, including forced pregnancy; forced abortion; physical violence with the intention of terminating a pregnancy; and withholding access to, or sabotaging, contraception. One woman reported being forced by her father to marry the man who had sexually assaulted her. Another woman described being locked in a room and raped until she became pregnant. Two women reported being forced to undergo a medical abortion, in one case under extreme duress from multiple perpetrators.

My husband and my brother-in-law asked my cousin to come over because there was a big fight. I came to my room and my sister-in-law gave me the test and said if I was pregnant, I had to have an abortion. I told her I’m not going to abort this child; it was my child. I told her I couldn’t kill anyone, so she started punching the wall…I was shocked that they didn’t want the baby. I thought they should be happy and it was their family name…She was the dominant person, so I was afraid that without her permission, she would stop the baby…[S]he booked an abortion and made an appointment [under my name]. I said if they couldn’t afford the baby I’d go back to my country and stay with my parents, but I couldn’t kill my baby. He didn’t listen. (Mannat)

In several cases, women reported that their male partners had used physical violence on them during their pregnancy, often with the explicit intention of terminating the pregnancy.

He said, “You want to have this baby,” He said, “My mum doesn’t want the baby and I don’t want that baby.” He said, “You will lose this baby. I will make you lose this baby.” He said, “My mum doesn’t want the baby.” He said, “You want to have this baby.” He pushed me on the bed so hard and I felt it in my tummy. (Katie)

Other women reported that they had experienced recurring or escalating physical violence during pregnancy.

When he hit me I was 2 months pregnant with my daughter. He chased me because I was running for help. He dragged me and then he beat me. When I was 8 months I went back to him because someone was telling me, “You are pregnant, you should go back.” I don’t want to go back…I decided to go back because people around me are saying, “You go back to him or you’re going to be sent home [to country of origin].” When I went back he was good. He was treating me nice. Then, when I was still pregnant, he hit me again. He’s violent again to me. (Diane)

Financial abuse

A significant number of the women interviewed reported having
experienced some level of financial abuse, and frequently significant financial abuse. Participants’ experiences ranged from being housebound with no access to money at all, to being forced to cover all the financial expenses of the perpetrator and sometimes other family members. For many participants, financial abuse was coupled with surveillance and control, as well as the threat of physical violence. In particular, a number of working women detailed the ways in which they were forced to surrender all their earnings to their partner under threat of physical violence.

When I didn’t give him my money he was angry with me. One day I spent $60 so he got angry and he beat me very badly for not letting him know…The second [time] was when I wanted a new iron and he didn’t let me buy a new iron. I got upset and then I went to my bedroom and he came and then sat on my stomach and slapped my face, “Why are you upset?” That sort of thing. (Bharti)

Other participants described situations where the perpetrator would not share costs or contribute any money to the household, including support for children. Many women reported being responsible for all expenses, and the sole contributors to shared or joint bank accounts, which were then emptied by their partners. Some participants in these situations were on Centrelink benefits. Others were forced by the perpetrator to be the sole wage earner, or conversely found work to cover household costs despite perpetrators not wanting them to work and the women subsequently risking exposure to other forms of violence.

A number of the women we interviewed had been entirely dependent on the perpetrator for money. One participant described her experience in a remote rural area, after marrying an Anglo-Australian man.

I didn’t have any money, he would throw money at me. And I wasn’t eligible obviously for Centrelink or anything at that time because I was only new here and on a tourist visa. And then he was going out with another woman. Yeah and then obviously I was pregnant with a daughter and um, yeah and they decided to move in together to another place which is not…it’s a small [town] so it’s only like a few minutes from where I was and everybody knows about it. So yeah, I didn’t have anything…basically I just lived there by myself and just relied on whatever he gave me. And as I said, he would throw ten dollars and told me to work on my back. (Marsha)

In some cases, women’s experiences of financial abuse took place in the context of financial arrangements or dowry expectations connected to marriage. In instances where women reported dowry abuse, they also reported the involvement of their extended family on the perpetrator’s side (including their mother-in-law, father-in-law, sister-in-law, brother-in-law and sister-in-law’s husband) in abusing dowry arrangements.

Before the marriage, I had only met him for 2 hours. My family found him and said he looked genuine. He was staying with his sister in Australia. After the marriage, they were asking for dowry and money. I came to know that they’re money-minded people. I thought maybe he wasn’t like them, but it turns out he was. I had been told that he had a good job and owned two restaurants, but when I got here, I realised that wasn’t true. When I came over, they asked how I could come to Australia without the money. They said they wanted $2,000 and my father didn’t give them anything. This was the first time I was aware that my parents-in-law were saying so many bad things about me to my husband. My husband was continuously telling me I should have brought more wedding gifts and that my parents’ gifts weren’t good enough. When I said they had given enough, he choked me. (Aarti)

Financial abuse featured strongly in many women’s accounts as a key form of control employed by perpetrators, which in many cases continued to punish or disadvantage those women who chose to leave their violent partner. Several women reported leaving with no money or assets, and many others reported ongoing financial abuse or financial difficulty after separation, as a result of perpetrators undertaking vexatious litigation, not paying child support, and emptying women’s bank accounts and taking their belongings. Three women had filed dowry harassment cases against their husband and his family in India, where the payment or receipt of dowry is illegal. Both the women and key informant interviewed provided many examples to show that financial abuse has significant negative impacts on women’s help-seeking opportunities and their experience of support services in the event that they do leave a relationship. Additionally, many women suffer prolonged financial abuse or financial disadvantage after separation, either as an intentional tactic of perpetrators or as a consequence of financial or other abuse experienced during a relationship with a violent partner.

Verbal abuse

Every woman that we interviewed reported verbal abuse. Women described name-calling; being put down and belittled, often in public or in front of their children; and perpetrators shouting and using aggressive and abusive language.

Every day he will tell me I would see what he was going to do and screaming in my face all day. Not being nice with the boys [their sons]. ”You are fat.” He would say to me, “You are fat. You are ugly.” (Fatima)

Women spoke about “taking” the verbal abuse as a strategy for avoiding other forms of violence that more directly threatened their safety.

I wouldn’t talk back to him. I’d just let him get furious and talk like that. I didn’t want to feel the anger and I would let...
him let it all out and everything…but it just didn't make a difference. (Hanna)

Controlling behaviours

In addition to financial abuse, women reported controlling behaviours that were linked to perpetrators’ jealousy, tactics to isolate women from friends and family, and general attitudes of entitlement or proprietorship over women. A number of women also described controlling behaviours that limited their opportunities for professional development and education, particularly in relation to learning or improving English language skills.

[At English classes] my dad would sit next to her. That’s another violent situation. He’d sit next to her. She’d say she couldn’t even look around, in case there were men. He would put pressure on her by saying not to look around, or if other ladies would try and talk to mum he’d say, “Why did you talk to her? What did you say?” That’s why she stopped going to English. (Wahida)

Many participants also reported that perpetrators scrutinised and monitored their social media accounts, mobile phone calls and work schedules, as well as policing and restricting their whereabouts and friendships.

He watched everything. All passwords were with him. He’d check my Facebook like I was a little girl. Every comment I wrote. When I write in my language, which he doesn’t understand, I had to translate every comment I did on Facebook every night. He’d ask what I wrote. “What did you write here? What did you say here?” Sometimes, it was just silly stuff. Women talk about shampoo. I don’t know, but he had to know what I said. (Amira)

We had to be home by five o’clock or six o’clock because [my Dad] knows five o’clock all the offices close…If I was 5 or 10 minutes late my heart would start beating faster and my sister would be driving and I’d be saying, “Oh my god, go home faster or he won’t leave us alone.” He had installed this fear in our hearts. It really felt like torture. I’d even cry in the car. I’d say, “What should we do?” She’d be stressed…I do remember one day he came to my university and hit me in the car. We were in the car park and lucky there wasn’t anyone in the car park. He just hit me for no reason. “Why weren’t you answering my phone call?” Not answering his call was the biggest crime ever that we could do. He’d call us during the class constantly. (Wahida)

A number of women described the ways that perpetrators used communication technology to control and perpetuate psychological violence against them.

He put something to listen into my phone…Monitor or listen, I don’t know. That’s all the time he says, “I had a dream you were talking with that person. I had a dream you were talking with your mum.” It was like he was playing with my mind. Finally I understood he was listening to me. (Helen)

Enforced social isolation

Social isolation is a tactic widely used by perpetrators of family violence, against women from both immigrant and non-immigrant backgrounds. However, our interviews suggest this tactic of violence can be taken to quite extreme lengths in situations where women do not speak English, do not have family or friends in the country, do not know how to drive or use public transport, and in some instances do not know where they live and do not know if anyone other than the perpetrator knows where they live. In several cases, women reported being locked in the house whenever the perpetrator was away, finding that their new homes were in isolated locations without access to transport or phone reception, or being hidden from view if other people entered the house. Many women expressed feeling like they were prisoners, servants or slaves. One woman was not allowed to leave her house for 3 years.

Backyard, I didn’t know, Curtain must not open. I was in the jail. Dark jail. Painful jail. (Celine)

For several participants, geographic isolation assisted perpetrators’ methods of control and compounded participants’ fear to act in the face of other types of abuse.

Especially every night he is drunk. I’m not safe there anymore. We were living in isolated area with no phone signal. I fear for my life already. It happened to me. I cannot contact anyone. Just only landline and mostly every night he sat in front of the phone. I can’t escape. (Pocahontas)

Multi-perpetrator violence

Women sometimes reported that multiple family members, extended family or even social networks were involved in policing and controlling their behaviour and actions. In a few instances, this included extended family members living overseas, who exercised control remotely over the household. In other cases, women described a variety of ways that family members and friends colluded to monitor and control them.

His whole family was involved. My husband talked to my mother-in-law every day. Every day telling her “this and that happened”. She is the mastermind of the house. (Aarti)

He will make sure that I’m told by other people [siblings and friends] to behave. He uses the family network…It’s very systemic. [He tells] other people [that I am not being a good wife] and then he gets those people to call me and talk to...
Key informants reported that the involvement of multiple perpetrators in committing violence was something much more likely to be experienced by immigrant and refugee women. A number of key informants also observed that extended family and members of women's cultural communities could be supportive of and participate in family violence, in controlling women's behaviour and reinforcing men's controlling behaviours.

All of a sudden we rip him out of the house, so he's shamed, she's shamed. She's the guilty party because she got him removed from the home. I've had them say to me, and it's heartbreaking for me, because I can't do anything, they say to me, "If you don't let him come home tonight, they will kill me". What am I doing here? I'm taking him out of the home because we want to stop him from killing you, but the family's going to kill you anyway. (Law and justice service provider, Victoria)

Immigration-related violence

Another distinctive control tactic reported by immigrant and refugee women was perpetrators using threats, intimidation and deliberate misinformation around women's visa status. Several women reported being threatened or intimidated on the basis of their immigration status, regardless of what visa they were on. Some women later found out these threats, such as threats of deportation, were groundless, but they did not know this at the time. Key informants observed that women who had come to Australia through the Humanitarian Programme and were permanent residents were not immune from being intimidated by perpetrators in this way, even though they were not in the same type of dependent visa category as women who had been sponsored on a partner visa. Perpetrators capitalised on women's uncertainty about their rights and entitlements (as well as those of their children) and on the wider negative representations of refugees in the public domain to foster a climate of fear. Equally, women who were on partner visas often had no knowledge of the family violence provisions that would allow them to continue an application for permanent residence even if their relationship had ended. Women seeking asylum or on visas where there were no family violence provisions were particularly exposed to this form of intimidation.

When we first came to Australia, first day, just looked like this. "They'll tell me when you do anything and Australia will take you and push you outside Australia and not give any visa." He told me that just to scare me. He'd say "No visa for you, just for children and ex-husband." (Dalal)

Every time I said something that made him unhappy he asked, "Who is the person that has sponsored you?" My children had to understand the same concept and that they couldn't say anything against him. (Hien)

Women's fears around being deported or sent home were sometimes less to do with leaving Australia and more to do with the consequences for them if they returned to their home country, or if they were separated from their children.

Because he sponsored me he was thinking that he owned me and he was threatening me... "If you do this [leave] I can do this to you or I can disappear you. If you go to India I can do anything to you. If something happened to you nobody would even know. In India it's not strict like Australia." He kept threatening me like that... I was scared when I slept next to him. I was scared that maybe both boys [her husband and his brother] would do something to me. They are more powerful. And, we are living in a place that's very quiet in front of the park. It's a big park. Nobody knows if something happens. Maybe they'd say, "no, she was suicidal because of her panic attack or something." (Aarti)

Violence perpetrated against young immigrants and refugees living in Australia on an orphan relative visa or remaining relative visa was a particular and especially difficult form of family violence described by service providers, especially where the perpetrator had sponsored the young person's visa. In situations where family violence was defined as only occurring between intimate partners, this violence may be missed or the young person may have limited opportunities to access services.

Other forms of violence

While all families negotiate the division of domestic labour differently regardless of their cultural background a number of the women interviewed described how their violent partner, and in some cases his family members, forced them to work in the house to an extent that could be characterised as domestic servitude.

It was really hard to even breathe at that place. I was the one doing the cooking, cleaning, everything for [my husband and his brother]... I would work 3-11pm, be home by 11:30pm and then have to wake up at 4am and cook for my husband so everything is fresh. He wants everything fresh. (Aarti)

Some women reported violence based on their religion. Often this involved perpetrators mocking their beliefs or damaging items women used for prayer. In one instance, a Hindu woman reported being forced to eat beef by her non-Hindu partner and his family while they taunted her.
**Trajectories of perpetrators’ violent behaviour**

Trajectories of perpetrators’ violence against the immigrant and refugee women in our study varied widely. Women reported that usually once violence had begun or occurred, perpetrators did not choose to stop the abuse, seek help, reform or positively change their violent or controlling behaviour for any significant period of time prior to the end of the relationship. Restrictions on violent behaviour often only occurred after outside intervention from police or extended family, or after women had gone into refuge, as was the case for many of the women interviewed. Many women reported that perpetrators became abusive almost immediately after their marriage, or after women had joined their partner in Australia, and many also reported that the end of their relationship with the perpetrator was characterised by either a significant escalation of physical violence or increased fear for their personal safety or the safety of their children. Very few women perceived the perpetrator’s use of violence to have decreased over time without outside intervention; one woman observed her husband had stopped using physical violence since they had arrived in Australia after living in a refugee camp; another felt that in response to her “giving in” about some aspects of control, her husband had “mellowed” in old age.

In the end, it took years. It was only in the last few years, that he realised it was wrong. He admits it himself, he's good in his own little way but the way he treated me was very depressing at the time. (Trinidad)

While each woman’s experience of family violence followed a personal trajectory, almost all women reported experiencing ongoing and repeated violence from perpetrators over prolonged periods of time, sometimes decades. Most of the women who had been in relationships for 10 years or longer reported that they had married young and had experienced violence throughout their relationship. For a number of women, their relationship was clearly premised on violence. For example, one woman reported forced marriage and another reported rape that then led to forced marriage. Of the few women who reported leaving within or just after a year of forming a relationship with the perpetrator, almost all had met their husbands through an online introduction service, social media or informal introduction through a friend. These women had limited prior knowledge of, or face-to-face contact with, the perpetrator, and had experienced high levels of control, intimidation and physical violence almost as soon as they entered the relationship. Several women reported that their husband’s violent or controlling behaviours were instigated by or initiated following communication or interaction with their parents-in-law. Several others cited alcohol or drug use as a catalyst for violence or an increase in violence. Two women reported that violence coincided with their husbands’ gambling addictions or related financial stress.

Some women we interviewed left their former partner as soon as the abuse that they had experienced became physical violence. Other women decided to leave when violence escalated to the point at which they were hospitalised or police intervened. Although many women’s experiences of violence were characterised by a profound sense of shame and fear about disclosure or exposure to other family members or friends, a number of women described making appeals to their family or community leaders to intervene. A few women reached the end of their relationships through extended negotiation between his and her family, or upon receiving the support of their family. Several other women’s experiences of violence were marked by being completely abandoned by their husbands. Participants’ experiences of violence did not follow a straightforward or linear course, and very often involved prolonged, erratic and episodic periods of abuse.

**Short and long-term consequences of violence**

Immigrant and refugee women described myriad short and long-term consequences of family violence that affected all aspects of their lives, including their physical and mental health and wellbeing; their economic security, financial circumstances, income and employment; their family life, connections to family and social networks; and their connection to and ability to return to the places they consider to be “home”, whether this be their country of origin, family home or local community. While many women were able to reflect on positive outcomes and personal growth that came from managing and leaving relationships in which they were subject to violence, the harmful consequences of violence were felt regardless of a participant’s distance from her experience.

Women reported a range of health and wellbeing impacts both during and after their experiences of family violence, including physical injuries which in some cases had led to hospitalisation, reduced or impaired mental health, and an increasing and persistent fear of the perpetrator committing violence, returning after separation, or seeking retribution. Although the reported health and wellbeing impacts of family violence occurred across a continuum, almost all of the women reported stress, fear and anxiety during the relationship, regardless of the frequency or severity of the perpetrator’s violence. Many participants also expressed feelings of isolation, depression, guilt and self-blame, low self-esteem, loss of confidence, and in a number of cases, suicidal thoughts.

As soon as he hit me, everything changed. I no longer see anything positive and don’t even know who I am anymore. (Sara)

I said that I didn’t want to live and suicidal thoughts were coming. I tried to cut my vein with a kitchen knife. So many
marks were there but I didn't succeed. I was thinking that even my knife wasn’t helping me. (Mannat)

In addition to specific physical injuries resulting from perpetrators’ acts of violence, women’s accounts frequently indicated other physical consequences of the perpetrator’s abuse, including fatigue, headaches, loss of appetite, physical health emergencies that were later diagnosed as psychosomatic, and health issues that were neglected by the perpetrator. One woman reported being diagnosed as having a blood infection but her husband would not pick up her prescription. Another woman reported a serious burn caused by the perpetrator that was left untreated because she was not permitted to leave the home. A number of women connected their experiences of miscarriage, abortion, complications with pregnancy, and maternal and child health issues to the stress caused by family violence.

That time my daughter is 1 month and I stop milk and she’s premature and all. That’s because I put up with him and my face is swelling and everywhere marks and everything. (Shanti)

In addition to immigrant and refugee women outlining the physical and mental harms that they experienced, they frequently described the detrimental impact of the violence they were subject to on their children's mental health and wellbeing.

I was reading through the effects [of family violence] on children and all that and I’m looking at my children. [Son’s name]’s starting to be really hyper. He’s always running around. He would get out of the car, run towards the street. There’s three instances where he almost got hit and during all this time we weren’t really thinking straight. We all absorbed the shock. We were all going through it. Even [other son’s name], he’s a quiet child but he’s more quiet than ever, not saying anything. When he sees me cry he would just start crying. I wouldn’t even say anything and he’d start crying. I said, “It’s okay. It’s all right to feel like this because that’s what happened. I don’t know what’s going to happen but I don’t want us getting hurt anymore… We’d be watching telly and he’d say, “Dad’s here”, and then he’s gone and runs to his room. He’d be in a state of panic to make sure “have I brushed my teeth, have I done this, have I done that”. (Frida)

Frida went on to describe the fear in her children's eyes when they witnessed the violence her former partner used against her:

I was the one trying to defend them and now they saw me helpless. I was so angry because how could you take that security from them? (Frida)

Other women we interviewed described how family violence had disrupted the mother-child relationship, with some children feeling that they needed to manage their father’s behaviour or protect and comfort their mothers.

I used to see my son crying, frightened because of loud arguments, shouting and when he used to slap me. My kid when he was young, he used to sit with me and rubbing my cheek, “mama don’t worry” [crying]. He didn’t have that intimacy with his father. (Karen)

It was clear in a number of the women’s accounts that some men attacked the mother-child relationship, even after women had left them and the physical violence had ended, by trying to turn children against their mothers. On occasion, extended families and sometimes community members colluded with and participated in this behaviour.

After separation and in the longer term, many immigrant and refugee women reported that they continued to experience poor mental health, and some were attending regular counselling or support groups. Women reported experiencing ongoing insomnia, fear, depression, low self-esteem, loss of confidence, stress, self-blame, difficulty staying focused and nightmares. While only one woman was able to identify herself as experiencing post-traumatic stress, several women described triggers which heightened their anxiety, including passing cars, seeing cars that resembled those of the perpetrator or being in locations or situations where they felt there was a risk of seeing the perpetrator or a friend of the perpetrator.

Even if I hear his name, it freaks me out. If I meet someone with the same name, I’m shaking and crying because everything comes back to my head. It’s really hard. (Sara)

Now I jump to anything. That fear in me, I can’t help it. Even when I see a white car, knowing he’s at the moment in Sydney, I look at the plate number because I just don’t know. He put that fear in me and it’s not easy for me to let it go. I think mentally, I’m not a nutcase, but it has mentally destroyed me. (Lucy)

During the process of, or post, separation, several women reported death threats from their former partners. Many of the women described ongoing violence and repeated breaches of intervention orders, perpetrated by their former partners but also his extended family. Other participants described how vexatious proceedings, deception and bullying through the courts (including the Family Court) exacerbated and prolonged the harms to their mental health that had been caused by the original family violence. Women struggled with feeling that they were not believed.

Women reported severe financial difficulties as a result of leaving the relationship, including those arising from loss of property, loss of earnings and costs of court and legal proceedings. Others described the impact of family violence on their education, careers and future. For a number of the women we interviewed, the
hopes and aspirations that had led them to migrate to Australia had been replaced by unremitting exhaustion.

Maybe I’m strong. Maybe I’m healthy. [But] my mind and my heart is really, really broken. I’m still trying to get my future but I’m just tired. I’m tired trying here. I’m tired of this language. I’m tired that people think I’m strong enough and confident enough and my English is “perfect”. All the time they told me I have perfect English in the refuge, police and everything. Still I can’t get enough marks for my IELTS [English language test] and I have to study more and I have to use Centrelink. I keep going because I have to. I feel I’ve already lost hope but I feel I’m trying to just survive it. I can’t see a future for myself because I’m already really late to get help. But I’m not on the street and I have to study and I’m young. I don’t have any illnesses or other stories. I have to put myself on track to do it but I’m tired. (Helen)

Women’s responses to violence: Resilience and help-seeking

The factors that either inhibit or enable women to seek help in response to family violence are largely similar for immigrant and refugee women and non-immigrant women. These include women’s fear of retaliation by perpetrators, persisting with relationships for the sake of children or deep commitment to their marriages, previous negative experiences from contact with services, feelings of low self-worth and powerlessness, hopes for change in perpetrator behaviour, the effects of social isolation, and financial barriers. Extreme experiences of social isolation, limited proficiency in English, unfamiliar service and justice systems and concerns for the implications for residency status present additional and significant barriers for immigrant and refugee women in seeking help to deal with family violence. As highlighted in our State of knowledge report, there is some evidence that immigrant and refugee women are less likely to seek help in response to family violence, may endure family violence for longer periods, and are over-represented as users of crisis services than non-immigrant women. In addition, processes of help-seeking may extend over lengthy periods of time because it is not uncommon for women to make numerous attempts to stop the violence before coming to a decision to end the relationship.

While our analysis identified various factors that inhibited or enabled women’s help-seeking, what is perhaps most striking is the multiplicity of ways women actively responded to their specific circumstances and resisted violence, often with considerable ingenuity and at great personal risk. Most women interviewed were highly resourceful in seizing opportunities, often making repeated attempts to seek help. They did this while overcoming fears about help-seeking and concerns about negotiating unfamiliar services, sometimes with significant communication barriers.

In this section, we consider immigrant and refugee women’s responses to violence, understanding these to broadly encompass seeking help through formal and informal channels, from services and others in the community; and women’s individual and collective strategies to resist, negotiate and end family violence in their lives. We also discuss the help seeking pathways that were described by the women and key informants we interviewed.

Women’s beliefs and concerns about help-seeking

When men’s violent behaviour emerged, women all described making efforts to address it, often through efforts to mollify and avoid “upsetting” their partners. Even as women became increasingly disillusioned with their relationships, they were often determined to keep them intact and did not seek help in the first instance. This was driven by concerns about their economic situation and the reactions of their families and communities, cultural or religious positions that marriage was a lifelong commitment, and beliefs that it was best for children to grow up in two-parent households. Others were overwhelmed...
by the immense challenges they foresaw in re-establishing their lives in Australia all over again as a single parent.

Many women interviewed recalled a range of concerns and fears they had held about seeking help, whether from informal supports like family and friends or formally from professional support services or authorities, such as police. For some women, these fears were based on perceived or threatened repercussions for them or their family if the perpetrator discovered their actions.

Yeah, I was afraid. A friend of his kept telling me that I’m going to be deported and I’m not going to get my daughter because she’s Australian. (Diane)

For others, reluctance to seek help stemmed from feelings of shame. A number of women expressed feeling personal shame, embarrassment or humiliation about their situation, their perceived failure to sustain or create a successful marriage, or their inability to keep the family together. In a few cases, women also cited cultural taboos around speaking about personal issues outside the family unit.

I tend to follow the Chinese proverb: “shameful family issues should not be told to a third party.” (Meilan)

In some cases, women’s feelings of shame were intensified by their physical distance from their family or friends living overseas, which complicated their ability to communicate openly or personally. Women worried about what their family or social networks expected or believed about their situation.

I did hear about the domestic violence agencies and all that but I couldn’t approach them because I was afraid. I thought, if I do that, what’s going to happen? (Wahida)

Both of our families—his family and my family—are well educated. They have very good jobs and their social status is really good. I just started to feel very low and ashamed that we’re living this kind of life…We’re in a first world country, we’re supposed to be the ones who actually should help them at some stage if they needed support. It just seemed terrible to me but I wouldn’t tell anyone about it…Although I was close to my mum and sisters, very close, I would never let them feel that I was unhappy. I kept bottling everything up. (Hanna)

Women were concerned about judgement from other members of their community or family and in some instances, the shame their actions would bring to their families. Fears of judgement were often grounded in women’s expected or idealised gender roles and were sometimes directly reinforced by family members, as discussed in the Family and Community Context section of this report.

In most cases women’s concerns or reluctance about seeking help was not limited to informal supports, but included accessing services. Many women recounted their fears about what would happen if they contacted services, and of what would happen if the perpetrator found out. Some women were unaware of services or rights, and those who did know services they could contact were usually unaware of the consequences for them if they accessed those services.

I used to live in the housing commission high-rise and lots of traumatic events happened there. When I went back there to take photos I was surprised by how afraid I was and I couldn’t stop the car, so the image is blurred. The blurriness represents how I feel going back. It’s hard realising that it has been so many years, but the feelings are still there.
I was thinking, what does it mean when I have an intervention order? He could get more violent, he could be upset. (Hanna)

Some women reported that they had thought local services were not relevant to them as immigrant women or would be unable to help.

There was nothing that was specific to me. If I was going to walk in there, how were they going to understand me? (Ruby)

Many women had negative experiences with authorities both overseas and in Australia, and this undermined their confidence in services. While some women we interviewed described their initial fears about Australian authorities and services as being unfounded, other women’s reluctance to seek help was based on previous and sometimes repeated unsuccessful attempts.

I can’t trust police. I can’t trust Immigration. I can’t trust my ex and his family and here, without language, I can’t trust Australia. They are threatening you that they will kill you or they would send you or Immigration doesn’t care about you, police don’t care about you and you just have yourself. (Helen)

Some women described feeling like they needed to reach out and seek formal help, but their lack of familiarity with local systems meant they felt stuck and not sure how to go about it.

I felt like I was going mad. I needed to tell somebody. I couldn’t move on and I knew that I could be, I felt that I couldn’t be the mother that I wanted to be unless somebody helped me to get all these things out that had happened from the time I was born into it. I just couldn’t move on and I didn’t know how to move on and I wanted to know. (Marnie)

A number of women described how perpetrators’ controlling behaviours meant they were in situations of extreme social isolation, trapped in their own homes.

Well, how can I get out? I didn’t even know there were buses and I can’t drive. (Sara)

Other women described being unable to seek formal help because of lack of income or housing options.

My sole problem is going to be the income and the rent and who would give me rent. They all look too high. I didn’t know anywhere else out of [my area] to move to that I would feel safe. I just didn’t know anywhere else. I was starting to feel overwhelmed and scared and thought where would I go, I’ve never been out of this area and I’ve been so isolated I don’t know anyone. (Hanna)

I had nowhere to go. Where would I go? Where would I get the money? Who would help me? If I’m going back to [country of birth] he would follow me. He’d kill me over there. He always said to me, “If you leave me I will scar you.” (Katie)

A striking feature that cut across many of the interviews with immigrant and refugee women was that, in situations of often acute social isolation, women’s help-seeking involved considerable personal resourcefulness and their willingness to act decisively and take risks. Katie, quoted above, went on to describe her first contact with the service system:

I had enough. He was saying, “Katie, Katie.” Always thinks he was playing with his little animal. “Katie, Katie, Katie.” I didn’t turn back. I knew if I turned around I’d go back to him but I just walked straight. I don’t know if I crossed the street properly, I know I just walked straight out and went into the police station. There was a man there and I said, “Please, I need help.” [Interviewer: You just walked in, with no bag or nothing?] Nothing. I said, “I need help.” …[after] 9-and-half years, everyone was so shocked. Even my best friend who supported for so long. I called her at the police station. I said, “I’m at the police station.” She said, “Katie, you made it.” I said, “Yes.” (Katie)

Seeking help from family and community

Key informants often reported that immigrant and refugee women experiencing violence would seek help from family or community in the first instance. Our interviews with women suggested that this was frequently true, though for some of the women we interviewed, the involvement of extended family or community members resulted in negative experiences including stigmatisation, intense judgement and excommunication.

My friends, the mums. They don’t come back around because their husbands told them not to, because I’m on my own. My husband would have right of way…As soon as they know I’m not with my husband, they sort of walk away. (Marnie)

My mum and my brother they disowned me. They said, “If you divorce this person don’t come to India. It’s a shame on our family.” For 5 years I haven’t been in contact with them. (Jaya)

In a number of instances, women who chose to confide in a family member or friend did not receive the support that they had been looking for.

I told to her everything and I told her I’m too scared, what can I do? Then she said, “Don’t be silly, don’t be stupid, you stay in the house. Don’t leave the house. He has to go out. You have to stay in the house with the kids. Don’t be silly…if something happens, no evidence, nothing, he will tell a different story” (Shanti)

Despite the risks, many women reached out to trusted family members or friends living in Australia as well as overseas. Some of these women were surprised to find that their friends and family, sometimes including the perpetrator’s family, offered
them support and condemned the perpetrator’s behaviour.

[At the time] I was still worried of what they’d think of me because he’d probably say, “I married her and brought her to Australia and now she’s just calling the police on me and doing that.” That’s the stories he’s narrating to people everywhere in the world…[but] most people were actually on my side. Even his friends. I don’t see anyone who had said to him that “She’s wrong, she shouldn’t have done that.” (Hanna)

My family are very supportive. They always stand with me. If I say something then they trust me. In India there’s some people that they don’t support their daughters because of the culture and customs but my family are really good. (Aarti)

A few women described ongoing involvement and interventions from family and community members to attempt to stop the violence and restore safety. Even when family and community involvement didn’t result in perpetrators changing their behaviour, it was clear that women valued their community’s support.

We had group prayer every fortnight. A lot of friends would sit together and one of my friends is a teacher, so my husband asked them to talk to me. He didn’t tell them everything, but I explained to them after 2 days when he came back to my house. They [friends] had an argument and he [husband] said he didn’t want to come again…So, we sat together to solve the problem but it didn’t work. (Bella)

We called my family and his family. His family is, particularly from overseas, know other men here that know them that could talk to him so they rang them and said, “Sit down with him and talk to him.” They did, they had this little meeting. We had an intervention order in place but…Then they talked to him and he said, “Okay. I’ll change.” They said, “We’ll give you 6 months.” He said okay at first but then he started getting drunk and getting worse and his life just deteriorated and he became sick I think. He just went worse and then everybody said, “We can’t stand by you anymore because you’re not helping us and you’re not helping yourself.” (Hanna)

A number of women recalled how neighbours had offered to assist them to find help. Amira described having approached a neighbour, a woman who she shared an immigrant background with and whom she perceived to be strong and independent:

I sought help from one of my neighbours. I didn’t trust others because I was afraid he might know. That was my last chance, so she took me here [to a family violence service]. (Amira)

One woman described seeking assistance from an acquaintance, a woman she had met through her involvement in a local craft group. This was one of the few activities her husband “permitted” her to be involved in.

I was really scared. I hadn’t eaten for 2 days. I can’t even look after my boys. I contacted a friend…and I said to her, she’s Australian, “I’m really scared, and my family is scared as well. I want you to take me to the police.” She did. (Fatima)

Another important source of informal support described by a number of women was that offered by their workplaces and work colleagues. Women talked about the emotional support they received from work colleagues; the contribution of workplaces to their safety, with colleagues warning them if they saw the perpetrator in the vicinity of a woman’s work; and the sometimes material support co-workers offered.

[My boss was the] first person I ever bothered to tell that there were problems at home…She told one of her friends who was in a management position at one of the food places and she gave me three boxes of food that we lived off, really. Honestly, that was just extraordinary. Then everybody else got told and we got furniture and we just didn’t have to do without. [Support] came in and it came in in a flood…I thought why did I keep it a secret?…There is a system of support there if only you allow people to know what’s going on and they really want to help. (Maddie)

Women’s strategies for resisting and responding to violence

It is important to note that in the phases before, during and after seeking informal or formal assistance for their safety and protection, many women attempted to resist and respond to perpetrators’ behaviours to put a stop to the abuse. This included direct resistance during or following incidents of violence, subtle protective and coping strategies while in the relationship and after separation, and attempts to get help for the perpetrator to change his behaviour.

Yeah. It’ll happen, he’ll say sorry and promise not to do it again, but after that, it’s like everything’s so calm and good. Then it’s the same pattern. The second time it happened, I spoke up. I said that he abused me and he said that he didn’t. I told him he hurt me and to look at my face. I said it wasn’t good and wanted to sit down and talk about it, so we talked. I said that I thought we needed help and should see a psychologist. He said he didn’t want to go to them and talk. I asked why and he said he wasn’t comfortable and they were shit. I asked if we could go to counselling. I still had a brochure that they gave to me and he said he didn’t have time and didn’t want to talk to people about our problems. I asked if maybe we did yoga. I work in communications and public relations. They train me to find a solution to problems and try any possibility…so, I’m using my skills and say to try yoga. He says he’ll do it if we do it together. We Google the price and
he says it’s too expensive. I tell him we can go once a month and he says that’s okay. He promises me he’ll organise the money and I’m really glad. I started doing the yoga myself because I’m stressed. (Sara)

Some women saw their partner’s violence as a symptom of mental illness, ill health or addiction, and had sought help for them on these grounds. However men often resisted women’s efforts to get them help, or the resulting interventions had little or only a temporary effect on perpetrator’s behaviour.

I said that to him time and time again. “Look we’ll go to the doctor and see if we can start off with these men behavioural things.” I didn’t exactly know what. I said, “Go and consult with a doctor.”...He’d say, “No, I’m in control. I’ll just wake up tomorrow and I won’t be drinking anything. I can do that.” (Hanna)

He goes on to medication for bipolar and I think to myself, well you obviously have a problem, “Wasn’t his fault, he’s changed”...It took another probably, first 6 months were great. It was like a totally different person. I didn’t even know who he was, didn’t even look the same. Then it started with, “I’m bipolar do you know that by law if I stop taking my medication and I kill you, that I’ll get off because I’ve got bipolar and I have psychotic episodes, I have psychosis.” I started to be afraid again. That’s when it started to kick in that, “No, you are an abuser, it’s not because of your mental illness and whatever. You’re an abuser.” (Julie)

(It should be noted that only a limited number of women reported that they had sought help for family violence from a health professional, but the most common outcome for those that did was a referral to a psychologist. None of the women reported health professionals taking active steps to engage the men who were perpetrating the violence).

In the interviews, women described the direct and subtle ways in which they resisted and responded to the perpetrators’ violent and controlling behaviours. Some women put safety strategies that they had planned into action as they attempted to manage the perpetrator during incidents of violence.

He was just lifting me up and throwing me to the ground like a stupid parcel, so as soon as he tried catching some breath I stood up, took some water, and I grabbed the first phone that

Figure 7 “3am” by Kelly

When my son was little and he would be crying and his dad would be shitty, I’d go for walks at 3am around the inner city. Even though it was dark it was safe—safer than being at home.
I saw which was the home phone, and I ran outside. When I did that I started ringing 000. I used his mobile and my son used the home phone to ring up 000. (Frida)

For those who endured violence from fathers and other family members, resistance sometimes involved taking steps to shut abusers out of their lives over a protracted period of time.

I’ve been estranged from him [father]. He used to come into my home and go through my things. I literally got to the stage where I was hiding from him and trying to observe what he was doing so that I could then know how to fight him or try to reverse what he was doing. It was a lot of observation. That takes time. It takes a lot of patience. And, you really have no precedent to work from. Eventually I started leaving things around that [would suggest] I had a partner. He struggled with that. It was all make-believe. In his eyes it was a picture that was growing out of control: I have no control of her now. She’s not my property. (Ruby)

Opportunistic resistance for some women also took the form of planning for the future, knowing that one day they might be able to separate from the perpetrator and seek assistance.

So I open finally with him joint account and then I get the letter from the bank, I just keep that with me. Then next time, our housemate, the lady, she say, maybe you open another account and then you can keep your money there. And so I opened finally when he went to [out of town]. (Ella)

Some women coped with the abuse they were subject to by resisting the perpetrator’s dominance in subversive ways.

One day he sitting and he said, “I want my cup of tea.” I heard from the kitchen and he in the lounge room. I said “Yes.” I done tea and I looking, looking, and I spit in his tea, mix, mix, mix. I cannot hit him. I cannot swear to him. I was very scared that moment, very, very scared, he catch me…I spit in his tea and I give it him.” (Celine)

**Key informant perspectives on immigrant and refugee women’s help-seeking**

Key informants noted that it was a common experience among all women—whether of immigrant and refugee background or not—to deliberate on or resist seeking advice or assistance because of embarrassment or shame, or to resume relationships in the hope that family “problems” can somehow be resolved. Commenting on the ways in which women appear to prevaricate about whether they want assistance, or the kind of help they need, one informant noted:

Everyone’s more likely to return in family violence. It’s just the landscape. Women go to great lengths to save their relationships and to save their families. They’re charged with massive responsibilities around family maintenance and childbearing and people will put up with incredible things to try and keep that dream alive regardless of their culture or community. (Family violence service provider, Tasmania)

There was strong agreement among key informants that making the decision to pursue, and pathways for, getting help were rarely clear-cut and linear. For immigrant and refugee women the situation was even more fraught because of the upheavals associated with resettlement in Australia and the risk of losing family and community support. Key informants generally had thoughtful insights into the pressures on women in their help-seeking processes, noting that from women’s perspectives, the maze of services from which they might receive help could be experienced as impersonal and bewildering.

Key informants also recognised that seeking help often requires that women relinquish hopes that their situation will improve. This is inevitably distressing in ways that are heightened when families have been through many hardships to build new lives in Australia.

[Women’s] biggest concerns were worries of what their family and the community would think; they were unsure about what they wanted to do about their relationship…a large majority want to keep their family intact. (Law and justice service provider, Tasmania)

Key informants noted that it was important to understand immigrant and refugee women’s perspectives as they navigated competing notions of safety and risk.

I worked with an Indian woman who…drew me a triangle and said to me, “You start out as someone’s daughter and then you become someone’s wife, and then you become someone’s mother, and if you’re not one of those three things as a woman in India, you’re not anything.” And we were asking in our family violence [response], in our Anglo way, for them to leave that triangle completely and it’s not safe. (Law and justice service provider, Victoria)

A number of service providers noted that immigrant and refugee women’s decision to seek help involved weighing up the risks presented by staying with a violent partner compared to the risk of losing family, community and cultural connection. Many noted the double injustice that women experienced as victims of violence who were then obliged to accept solutions that frequently involved estrangement from family and community networks.

**Entry points and pathways to services**

Women’s initial contact with family violence services was often prompted by increasing frequency or escalating intensity
of episodes of violence. Most of the women we interviewed eventually chose or were led to seek help through formal channels, which included through police and legal services; settlement, multicultural or ethno-specific services; hospitals and health services; and family violence services.

Police as a pathway for seeking help

Immigrant and refugee women commonly reported that interventions involving police had been their pathway into the family violence services system. A number of women, or concerned bystanders, had called the police for assistance and this was generally in the midst of a crisis situation. Some women also described attending a police station following perpetrators’ use of violence against them. Ellen explained that she had been “very ashamed [about approaching] community members [about the violence she was experiencing] and finally that’s why I make the decision to ring the police”. Linh called the police in the middle of a crisis situation while her husband was actually taunting her to do so. She reflected:

I feel very lucky when I called the police. Before I called them I was scared of him [her husband]. On that day he said to me if I want he will call the police for me. I said, “Why do I need to call the police?” He kept asking me. When he beat me and he was kicking me in the belly at my baby he said, “Call the police. Call the police.” Then I call the police like my husband said, but I’m thinking in my head, “What do I need to call the police for?” I didn’t know in this country when you feel unsafe you can call the police for help…I was crying because he kicked me very hard. I felt hurt and ran to the room…when the police came everything just happened…they asked me if I knew someone else around there because they wanted to take me out of the house. (Linh)

In both Victoria and Tasmania, when police attend incidents of family violence, they are required to activate response procedures that involve assessing women’s levels of risk and needs for support. Key informants in both states estimated that the majority of their referrals (up to 75 percent) came from the police, and noted that police were a significant pathway into service systems for immigrant and refugee women.

Many key informants noted that women often call the police as a help-seeking strategy for dealing with an incident and to “calm” men down. Key informants recognised that immigrant and refugee women may not realise that when police attend they are obliged to activate pro-arrest policies and other responses, including seeking intervention orders on behalf of women and making active referrals to family violence and child protection services.

Police also became a pathway into family violence service systems when worried friends and neighbours called the police:

It’s just got to the point where [women are] totally scared and they know they can’t handle it and they need to get help…someone [who] is a little more empowered in their community…will say, “This can’t go on, I’m taking you to the police station”. This is the more common one, I think: the neighbours call and the women aren’t ready and don’t want the police involved. Somehow then it ends up here [at court] and they are backpedalling and we often get the situation where women don’t want an order in place at all. The police obviously are pushing for it and she definitely doesn’t want him [perpetrator] excluded from the house. (Law and justice service provider, Victoria)

Our data suggest police play a significant role in responding to crisis situations and linking immigrant and refugee women into services, providing active referrals to either state-wide 24 hour family violence crisis services or local family violence outreach programs. There is also evidence that many women lack awareness of the role of police, and the range of response options that are available to them.

Friends and family as pathways for seeking help

Many key informants noted the role of friends, community networks and, occasionally, family members in urging women to seek help for family violence. Friends or community members who had themselves been through similar experiences were particularly trusted sources of information and advice. The effectiveness of informal channels of information and support was increased in sites where there were dense populations of ethno-cultural groups. Key informants described how they would often see clusters or waves of women from specific cultural communities seeking help to escape family violence, as women in a particular community offered an example for other women to follow.

Each Afghani woman that we’ve helped that has got away from the perpetrator has actually made it easier for other women to leave because it filters through. The community is so tight. (Family violence service provider, Victoria)

An informant from a migrant settlement service also noted the value of community networks:

Some of the people in the community that I know, they have lunch together, and while they are having lunch, they have some sort of playgroup [for children] together. For example, playgroup is only once a week, but they go to different houses to do it. Of course they talk about things like that [family violence]. So one will begin to say, “Did you realise such-and-such is having difficulty. Did she tell you about this?” And I will say, “I have no idea, but she knows that she can come to me. If she is embarrassed, tell her don’t worry about
it.” It might make the process long, but the main thing is that they [women] know. (Settlement service provider, Victoria)

Other informants made similar observations of the importance of community-based “grapevines”:

The majority of our clients have come through referrals rather than self-identifying. Or through friends when we’ve done education and someone’s heard it and they’ve encouraged someone to come and speak to us. Or word of mouth. (Law and justice service provider, Victoria)

I’ve worked here for so long, I know all the people we’ve housed over the years and often it’s those ladies bringing in other ladies all the time from the—because of the—cousin and relative thing, all throughout Australia; um, they will bring people in regularly and drop them off at my desk and say, “I can’t have this lady at my house anymore, you need to [do something]”. (Family violence service provider, Victoria)

When delivering information sessions on family violence, key informants noted that it was not uncommon for community members to raise concerns about friends and seek advice:

We’ve had some really serious cases come up in that, where someone said, “Look, my friend’s in this really horrific situation”, and then we’ve worked to try and get assistance for that person. But it’s very difficult for us because, technically, we act on the client’s instructions; we can’t just barge in… without their consent, and that could put them in more danger, quite frankly. So it’s about—in those cases, we’d link the, the friend with some supports and get them to talk to their friend and see if the friend was willing to engage with those supports and kind of explain all the ways that we could assist in a really confidential way. (Law and justice service provider, Victoria)

The importance of community networks was such that a number of key informants, particularly those with public housing experience, noted that women sometimes moved from interstate to seek help for family violence. These women, often accompanied by children, had implemented their own strategies for seeking safety by relocating to diaspora communities that had established in other parts of Australia. Some informants commented that this reflects the efficacy of community “grapevines” but also, perhaps, a lack of services, information

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**Figure 8 “Healing Process” by Reeta Verma**

I took this shot while coming back from work one day after a long and tiring journey contemplating on life. Then I saw a lush green tree, strong but scarred. It reminded me of a life that had no scars to begin with but one day some idiot came along and scarred her.

Never mind; she is rejuvenating and she is healing. She will be alright. Look, she is being supported by another tree. Her scars will heal with care, compassion and love. She is going to be stronger for it. As they say, “part of the healing process is sharing with others who care”. Of course, she will be all right.
or trust in local family violence services where women live. A related challenge is that advice circulating through community networks means that women can develop expectations that are difficult for services to meet due to growing demands on services and funding limitations.

Pathways to different types of help: linkages between services

Women and key informants identified that local community services often linked immigrant and refugee women to the family violence service system. Interviews contained accounts of connections being made by migration and settlement services, housing services, sexual assault services, international student services, and health services. A number of key informants highlighted the role of English language teachers in referring women to family violence services, with others noting that doctors and hospitals are important contacts for immigrant and refugee women who are socially isolated, as they may be the only “outsiders” women are able to access.

We know that CALD women will often source out a prominent health service when they do have a family violence issue because everyone knows who a doctor is, they know where a hospital is. (Law and justice service provider, Victoria)

Once women are referred to family violence services, or have presented to a service and disclosed that they are experiencing family violence, they are likely to be linked to other services, including legal, health or migrant settlement services. This makes family violence services systems complex, although the aim is to provide integrated support.

Key informants from legal services reported receiving most of their referrals for immigrant and refugee women experiencing family violence while providing duty lawyer services in court. Legal service key informants also reported that they often needed to refer immigrant and refugee women to other types of legal services due to complex legal situations that required specialised legal advice in relation to immigration law. This shuffling between legal services added to women’s frustration and anxiety. In addition, some legal services were only available if police made an application for an intervention order or if women had lodged their own applications. Consequently, many immigrant and refugee women with low incomes were not able to access legal advice until their situations reached crisis levels.

Key informants from housing services reported that the majority of their referrals involving immigrant and refugee women were related to family violence. However, key informants also discussed the limited capacity of housing services to accommodate women whose visa restrictions left them with no income.

Navigating pathways to and through service systems is inevitably challenging for women with limited proficiency in English language and it is emotionally draining when women are required to repeatedly explain their situations to new contacts. Contact can be rushed and instructions confusing if women only have the opportunity to visit or call services to get help when perpetrators are not around. This is exacerbated for women with limited English.
Communication and access to information

As outlined in the State of knowledge paper, research conducted in a range of settings has highlighted the impact of language barriers on immigrant and refugee women’s ability to access information about family violence and to engage with the range of services available in response to family violence. Our research confirmed that, in a context where information is not available in a form that a woman can understand, an inability to speak and read English is a major impediment to immigrant and refugee women accessing effective and timely support for family violence in the Australian context.

Language barriers

A number of the immigrant and refugee women that we interviewed highlighted how they were unable to access information about what they were experiencing.

I have so many challenges and difficulties; the main is language problem. I do not have education well and I can’t speak English, I do not understand the law and regulations. Even they gave us the information [about family violence and the law] but it is only written in English, so it is not useful for us. (Wah Wah)

Language and communication barriers prevent women from being able to assess whether what they are experiencing is “family violence”, from knowing their rights under Australian law, from knowing the range of services that could help them if they are experiencing family violence, and from receiving appropriate service from the family violence service system. Language barriers cut across all service sectors that key informants were recruited from.

Many of the women and service providers we interviewed emphasised that existing measures to make information about family violence and family violence services accessible to women with limited English were inadequate.

Nearly every government department says that if you don’t speak English, you can get the information in other languages, but it’s clunky to access that. For a start, the choices [on the telephone] are given to you in English. (Family violence service provider, Victoria)

You know, the court is generally pretty good at providing interpreters, but only if you request it…There’s a lot of onus
on the clients to be able to say. It’s not like they [women] rock up and they [court workers] say, well, you need an interpreter. You have to be able to say, on an English, written form, I need an interpreter yes. So yeah, it’s a bit tricky. (Law and justice sector service provider, Victoria)

Key informants recognised that making written information accessible was an important element of overcoming language barriers, but was an insufficient response on its own.

So I’ve just seen people being given their [intervention] order in English. So, I mean, I think [legal aid] does have it in other languages, but see, a lot of clients that I work with aren’t even literate in their own language. So, um, and I think written information has, in some cases limited, you know, sort of usefulness. (Settlement service provider, Victoria)

In recent years, family violence services and service providers have developed a range of innovative mechanisms for disseminating information to women experiencing family violence through apps, websites and other technological approaches. Some of the women interviewed during the project were avid users of social media and communication technology, and may have benefited from these tools. However, many participants in the project highlighted the limitations of these strategies for immigrant and refugee women who may not read English or any language, who were not computer literate, and whose access to computers and other devices was often limited or controlled by perpetrators. The trend towards basic services shifting their primary mode of information dissemination to online platforms was seen to be a particular problem.

Some of the bicultural workers were challenging them [Centrelink] on “your services are all going online. You get a person from a refugee background coming in and you’re telling them to do things online and they have a language barrier. What’s wrong with this picture?” (Family violence service provider, Hobart)

Key informants recognised that it would not be practical or possible for all services to provide written or verbal translation of material into all languages, but felt that greater efforts needed to be made to find different strategies to disseminate information to women from key cultural groups in each particular setting. Some key informants described creative approaches for disseminating information about family violence, such as working with an interpreter to do face-to-face talks at community meetings, women’s handicraft groups or children’s play groups. It was felt that face-to-face delivery of information engendered trust, was more accessible to women who may not read in any language and had been effective in “getting the word out” through community networks about available services in local areas. However, participants emphasised that it was time consuming and therefore needed to be resourced appropriately.

It’s difficult because a lot of trust that you need to build with the community for a project like that to work, and to build, it needs time really…Their appointments and things do take longer when you have an interpreter, it is more resource intensive and it does take longer to explain things, because you don’t have that prior knowledge of the whole system that a lot of people have. (Law and justice sector service provider)

Women and key informants interviewed for the project emphasised that many immigrant and refugee women accessed alternative pathways to family violence information and services. As discussed in relation to help-seeking, this included a heavy reliance of family and community members and word of mouth. Key informants also discussed the importance of engaging with community and religious leaders, though some women interviewed were cautious about the role of leaders, who were most often male and sometimes held conservative views about marriage, gender equality and women’s rights.

While language and communication barriers were seen as an issue for most immigrant and refugee women, key informants identified some groups of women as having particularly limited access to information. These included women from small, newly arrived and emerging communities; women who had come to Australia on a range of temporary visas, did not have contact with settlement and other services and were at risk of extreme social isolation; and immigrant and refugee women living in regional centres.

I don’t think we get contact by [immigrant and refugee] women in family violence situations in regional Victoria anywhere near as much as we do in metropolitan Melbourne, so I would have a question about whether those women are as aware of their rights and are accessing information as much as women in the metro area (Law and justice service provider, Victoria)

Consequences of women’s limited access to information

Participants in the project reported a number of consequences of immigrant and refugee women’s limited access to information and the communication barriers they experienced in trying to seek help. Many key informants felt that one of the reasons immigrant and refugee women may endure prolonged exposure to violence and access services late was because of the communication barriers they faced in accessing help. Others emphasised the particular impact of communication barriers with police and other elements of the law and justice sector, which often had significant ramifications for the immediate safety of women and their children.
I think it’s particularly hard when it comes to police, ‘cause the number of clients who have said to me that the police have attended an incident and they didn’t have an interpreter. (Settlement service provider, Victoria)

Sometimes it’s hard for CALD clients to call to report for the breach [of an intervention order]. They cannot write, they’re illiterate, they cannot write who they spoke to, the day, the time and if they make the phone call about 2 or 3 hours later the police turn up and they can’t speak to them. (Family violence service provider, Victoria)

Many of the women that we interviewed also described the harmful consequences that they had experienced when police, in particular, did not follow protocol to engage interpreters. In many instances, women we interviewed had less English language skills than their violent partner and some women described occasions where police had used perpetrators to interpret for them, or did not attempt to communicate with the woman about her safety, only relying on the word of the perpetrator or other family member who spoke English.

The police came and the police called him [perpetrator] too and then he said, “No. No. I didn’t do anything. We just had a fight, an argument, and I grabbed her arms.” He told them a lie. I said [in her first language, which was not English], “He hit me very badly. He threatened me.” The police didn’t call an interpreter, the police talked with him. (Helen)

As has been recognised in the findings of the recent Victorian Royal Commission into Family Violence (State of Victoria, 2016a), addressing language barriers between immigrant and refugee women at all. Where interpreters were available, they were often male and also often known to the person who required an interpreter.

I have to say sometimes, “I don’t want someone from Hobart”. That’s not uncommon. (Family violence service provider, Tasmania).

[Onsite interpreters] They’re never available and it’s too expensive. The difficulty is that you can’t guarantee getting someone. It’s also difficult talking to a male sometimes. There are also limitations in the number of interpreters. (Settlement service provider, regional Victoria)

In regional Victoria and Tasmania, service providers frequently made use of telephone interpreters. While they described a range of limitations associated with phone interpreting, this was preferable to not being able to communicate with immigrant and refugee women at all.

Actually, nobody in Tasmania uses face-to-face interpreters because there’s communities of 100 [people] and there’s no way you can get around that. (Law and justice service provider, Tasmania)

Women we interviewed were frequently very positive about telephone interpreters, as they felt more confident that the interpreter would not be someone who knew them or their violent partner, and that their confidentiality would be preserved. However, they didn’t work for all women or all services. Women and key informants agreed that counselling services were particularly difficult to deliver over the phone.

[If women] come from a small ethnic community and on-site interpreters can’t be sourced in that language and so then you’re trying to use a phone interpreter and talking into a phone when you’re trying to engage in counselling, I think that can be a real barrier. (Family violence service provider, Victoria)

In other circumstances, such as in court, in-person interpreting was required, though not always available.

Limited availability of interpreters was a particularly significant problem in regional Victoria and Tasmania. In many instances there might only be one interpreter for a particular language group or no qualified interpreter available for face-to-face interpreting at all. Where interpreters were available, they were often male and also often known to the person who required an interpreter.

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In other circumstances, such as in court, in-person interpreting was required, though not always available.
There are policies where they don't do interpreters on the phone. I don't know who's going to jump into a train or car to come out from Melbourne to interpret some Turkish. The courthouse sometimes do bookings but they don't turn up. (Family violence service provider, regional Victoria)

Sometimes the limited availability was a structural problem caused by different government agencies or community services having contractual arrangements with particular interpreting service providers. This was a particular source of frustration for key informants when a high quality interpreter was identified and preferred by their client, but they were not permitted to work with them.

The courts use one service, Women's Health West use another, we use another. So that's difficult to get. Someone might be doing some work, CASA might be doing some work and have an interpreter who has been great with the client but you're not able to access that interpreter because you need to use a different interpreter. (Settlement service provider, Victoria)

Key informants also expressed frustration about the government department funding them or their organisation or agency having made such a contractual arrangement as a cost-cutting measure, with several noting that a low-cost interpreting service was also often a poor-quality service. Key informants in both Victoria and Tasmania repeatedly raised the inadequate funding available for interpreters, with cost-saving compromises being made that jeopardised women's safety and access to justice.

It is a big issue for the court in terms of the interpreting budget not being properly funded. There is a pressure administratively because our funding is not appropriate for interpreters, to only book one interpreter rather than two, for him and for her. We [also] only book interpreters for half a day so if the matter's not resolved by 1:00, we have to adjourn and things like that. (Law and justice service provider, Victoria).

Gender of interpreters

Both women and key informants discussed the impact of the limited availability of female interpreters. It was observed that there were considerably more men working as interpreters than women, and that this was particularly true for more newly arrived communities. While some women and service providers felt that the gender of the interpreter did not matter if they were professional and provided a high quality service, others had observed this to be a significant challenge in relation to family violence work.

It's always done with an interpreter and, yes, we always have the same old story where we only have a certain amount of interpreters and quite often we have males and you're not sure whether you're getting the whole picture. It's not the interpreter's fault either. We only have what we have. I often find with a lot of the Afghani women the minute the interpreter comes in, they put their head down if he's a male. (Law and justice service provider, Victoria)

I think there's a two-fold type of argument in the gender in that a lot of the female interpreters that they had, had very blurry boundaries about helping and the advice that they would give. I had most of my negative experiences through male interpreters but in saying that, [some male interpreters] had a very professional approach. The other factor then to consider is triggers for women. We had a male Punjabi interpreter who never really worked because women got really scared and it wasn't really culturally appropriate for them to be talking about this level of stuff to men. (Law and justice service provider, Victoria)

Generally, key informants agreed that it was very difficult to discuss instances of sexual violence through a male interpreter, and that therefore, where possible, female interpreters should be engaged.

I've had interpreters of particular backgrounds who won't actually say. They won't talk about sexual violence at all...It's only been when clients have spoken some English and say "No. I said that he forced me to have sex and the interpreter didn't say that", you become aware. (Law and justice service provider, Victoria)

While gender was an important consideration, key informants identified a range of other factors that contributed to whether a particular interpreter was appropriate for a family violence case.

You wouldn't get someone from one of those dominant cultural backgrounds who has actually been an oppressor in their home country. You would want to get someone who is fairly educated and open-minded because for some interpreters this might be too confronting or challenging, or they might think that this woman is doing the wrong thing by selling out her husband. (Settlement service provider, Victoria)

Quality of interpreting services

In addition to the limited availability of interpreters, both women and key informants described many instances of unprofessional, poor quality and downright dangerous practice by interpreters.

[It should be] a good interpreter. Not like my interpreter. He interpreted me, you know what he did? He went overseas, they [her family] said the interpreter said you put [husband] in the jail...He went overseas and he said "I know your daughter and she's very bad woman. She put [husband] in the jail, she take [husband] to the court every day." A lot of things. Like this interpreter we don't need it. (Celine)

He [interpreter] told me "Listen, she knows she cannot do..." (Law and justice service provider, Victoria)
In her culture she has to stay there and put up with it. The interpreter is saying that to me. So imagine the things that he was saying to my client…I’m going, “I want you to interpret and tell her these things.” He said, “I’m happy to tell her but she knows this. She has to stay put and shut up.”

While many key informants agreed that, all else being equal, female interpreters were preferable, they were clear that an interpreter being a woman did not guarantee that they were professional.

I [was with her] client in the safe room and we were watching on the monitor—my client heard the interpreter tell the perpetrator he’s all right, he’ll get off this. It’s no problem, it’s no big deal. That was a female interpreter. He’s standing there all smug. She’s going, “I can’t believe what she’s saying.”

Key informants described a range of innovative strategies that they had developed for assessing the quality of interpreters that they were working with and for managing situations of poor practice.

If someone’s not okay we’ll have a bit of a code word to say and so I can easily make an excuse to finish the phone conversation and call you back with a different interpreter. But that requires quite a bit of explaining because I think women can often think that the interpreters work for you…so just explaining that safety thing, I spend quite a bit of time.

You keep a good eye on the body language of your client. They’ll often indicate to you if the phone interpreter is not going well. But, you often would have figured that out already, because I have indicators to tell me whether or not an interpreter is doing a high quality, professional job. Often, I’ll raise the alarm and I’ll put the interpreter on mute, and I’ll sign to the person, “How’s this going?” and they’ll sign back to me, “No”. And, I’ll say, “Thank you for your help today.”

Immigrant and refugee women who had experienced violence also used strategies to increase their safety when working with interpreters, including requesting an interpreter for a language other than their mother tongue (many of the women we interviewed spoke several languages), or by asking the service provider to refer to them by a pseudonym during sessions of telephone interpreting. Some women had had such bad experiences with interpreters that they chose to attempt to negotiate services without one.

I was talking with an interpreter and they just told me things and I was going crazy. So, I chose no interpreter.

These women recognised that their limited English may be misunderstood and not those of a third party.

While there were substantial problems identified with some interpreters and the interpreting industry overall, both women and key informants we interviewed could also describe examples of high quality interpreting practice. In many of these instances, interpreters had been involved in family violence work for an extended period, had developed an understanding of the gendered nature of family violence and of how the family violence system works, and had developed a reputation for good practice, which led to them being trusted by communities and services.

We have a full time Vietnamese interpreter based at Sunshine Court. He’s amazing. He’s like a male social worker…The women liked him so much that they would bring—we had one client who found another crying Vietnamese lady at the train station and just brought her in to see him. So they really felt supported by him…He was full time and he was full time family violence. He sat in with 8 years of my interviews but also Women’s Health West and InTouch so he got to see how the CRAF was made, he got to see what indicators really set us off, he got to know how the processes of referral happened.

However, some key informants also described a number of instances when they had been working with a skilled and professional interpreter in a specific role (such as at a court) and their position was de-funded or the interpreter became burnt out by the nature of the work and left.

Training and support

Key informants expressed frustration and concern about the lack of training and support given to interpreters who are engaged to do family violence work. They noted that this often led to burn-out and expressed concern that interpreters themselves may be traumatised.

I’ve had interpreters in here who clearly traumatised themselves and I’ve said “No, I cannot use you until you go and get some help. Because you’re not doing me a favour by bringing in your own story. We’re here for the client, sorry.”

Service providers also noted that options for them to provide feedback to agencies on the quality of interpreters’ work were limited and seemed to make little difference, with problematic interpreters still being engaged to do family violence work.

Feedback mechanisms. I think it’s very hard. I suppose we can put something together broadly to the service but there’s no ways to flag maybe interpreters that aren’t suited to supporting our service.
Interpreters’ own perspectives

Almost every key informant interviewed during this project raised “issues” with interpreters as major barriers to effective provision of services to immigrant and refugee women. As outlined above, both women who had experienced family violence and those key informants working with them identified problems arising because of the limited availability of interpreters (particularly for languages spoken by newly arrived communities); the limited number of female interpreters; and the limited skills and capacities of some interpreters, including many reports of interpreters’ unprofessional behaviour and limited understanding of the dynamics of family violence. However, these “issues” were less often considered from the interpreters’ perspective. Some key informants recognised that interpreters needed more training and support, but it was more common to hear expressions of frustration at how hard it was to “get a decent interpreter”.

A number of the bicultural workers involved in the ASPIRE project also worked as interpreters in a range of settings. We interviewed a group of bicultural workers who were interpreters accredited at various levels to explore their perspectives on working in the family violence area. They noted that they had had no training in family violence (e.g. what it is, the law in relation to family violence, the role of gender inequality), in trauma-informed practice or in interpreting in contexts of crisis. They explained the complexity of interpreting legal terms and concepts for which there might be limited words in their mother tongue. The interpreters described the difficulty of maintaining channels of communication with clients while asking questions that may cut across age or gender taboos in their culture. They emphasised the skill required to ask sensitive and painful questions in a way that did not distress or offend vulnerable clients, or cause a client to shut down and refuse to further engage in conversation or help-seeking.

In addition to these challenges, interpreters described the sense of responsibility that they felt when interpreting for clients in interactions with the police or the courts. Interpreters described the pressure they experienced when the quality of their interpreting might have significant consequences for women’s and children’s safety, men’s liberty, or their own standing and relationships within their community. Sometimes interpreters found themselves having to negotiate courts and other complex systems for their clients:

They asked me if he had the lawyer. He doesn’t have one. Even I asked, “Do you know what lawyer?” He said “I don’t know. What is a lawyer?” So we didn’t have a lawyer or anything like that. Even when he doesn’t know which room he had to go in, I am the one who had to lead him to the court. Too much responsibility. It’s not just getting in and translating.

Interpreters emphasised the difficulties they experienced maintaining relationships with community members, while also playing the role of impartial interpreter.

[On receiving a request to interpret] I say “Really? This person is my friend”, but they request for you, where the family violence is. I say “I don’t really want to know”. So it’s challenging because we have to balance the community member and you don’t want to lose that status as a community member.

These interpreters (who had all come to Australia through the Humanitarian Programme) described the personal impact of interpreting in relation to family violence. In part, this related to the difficulty of hearing members of their communities, sometimes known to them, recount awful experiences.

It’s hard for me. Like you [another interpreter] said, when you go home it doesn’t go away. If it was my daughter, you know? And then the next day within the community you will see them and you feel pain for that girl. It doesn’t go away.

In addition to describing the vicarious trauma arising from the nature of what they were interpreting in cases of family violence, interpreters recounted the particular impact of being required to engage with courts, police, lawyers and other authority figures.

My personal experience, my experience as a refugee, standing in front of authority and giving evidence is a big thing. It triggers me. It feels bad to walk up in the court; it brings up what happened to me. And you know when the police go “rattle, rattle” [walking with handcuffs jiggling at the hip], with all these things it triggers me. It feels like my mind goes back— flashback… Those are the challenges with interpreting in front of authority, in front of the law. When we came to Australia, we had to do interviews. We had to stand in front of how many people who interviewed you, and all this comes back. It comes back. You remember when you are being chased, shooting, gun, gun. And you see the police, they are all dressed [with guns in holsters], and the lawyers. When you have to interpret through the interview with the lawyers, images and pictures, the noises and voices, the authority, all these things come back… We have been chained, beaten, surrounded by authority, we’ve been interviewed and interrogated. And doing the court, the same thing again.

The traumatising effect of engagement with police, courts and other authority figures was such that some of the interpreters refused to accept bookings for family violence work.

I am too scared to go to the court or the police. I really panic and I can’t interpret.

Given that interpreting is a primary source of income for many of these women, this is particularly significant. Interpreters’
reluctance to take on police and court work may also explain the difficulties that police, in particular, may have in accessing interpreters in a timely way.

Interpreters described their isolation and lack of support to deal with either the vicarious trauma associated with interpreting in family violence cases, or the triggering effect of interacting with authorities. Few interpreter agencies provided counselling, meaningful debriefing or structured support of any kind, and interpreters were unable to access informal supports because of the confidentiality requirements of their work. The interpreters we interviewed felt they were seen “like robots” rather than valued personnel with the same professional development and occupational health and safety needs as any other person working in response to family violence.

Bilingual-bicultural workers

In addition to interpreters, bilingual-bicultural workers were recognised as an important resource for increasing immigrant and refugee women’s access to family violence information and services. A number of the women interviewed highlighted how a bilingual-bicultural worker had enabled them to share experiences of family violence that they had never communicated before.

Before there was the one [counsellor from the same ethnic background], she was the one who handled my case. She was a case manager, she talked my language…It’s more comfortable and sometimes we are emotional, we can’t express our feelings, so our language, we just prefer that. (Aarti)

While women appreciated being able to connect with a service provider who spoke their language or shared their cultural background, both the women and key informants explained that it was also about women feeling that workers understood the immigrant experience, even if they weren’t from the same country.

Well I guess it’s the cultural experience, the cultural know-how, the knowledge that we are different…that person might understand them better than Anglo-Saxon. Because basically, that person has come from somewhere, so they know how it is to be living in a different place, they may [have] experienced isolation [too]. (Marsha)

While women and key informants recognised the benefits of a diverse workforce, for many this was not the norm.

I’ve never seen a [legal service] mentor who wasn’t white. Um, I think that’s just the nature of, like, middle class, middle-aged people, who want to do something good with their time…It just can be hard to get people to engage with someone who seems so different to them and probably doesn’t really understand where they’re coming from and what they’re going through, and they’re pretty quick to pick up on that. (Law and justice service provider, Victoria)

In regional Victoria and in Tasmania, there were few family violence services that employed members of immigrant and refugee communities on staff. However, women and community members participating in focus group discussion recognised and appreciated those that did. Key informants also recognised the benefits of a diverse staff:

This is the first place I’ve worked where I’ve had a multicultural team…That is a huge source of pride to me, to see that reflected in the clients we work with, that they feel respected and cared about…They see that we live it. We live respecting everybody, or we wouldn’t have people here equal to everybody else. (Family violence service provider, Tasmania)

Women’s access to English language training

An unexpected theme in our data related to the importance of immigrant and refugee women’s access to English language training. While previous research had pointed to the importance of English language skills for immigrant women to be able to seek and receive help for family violence, less had been written about the broader role of English language classes. Immigrant and refugee women and service providers identified English classes as important avenues in and of themselves for women to access the family violence support system.

Once they [English teachers] build that rapport with their clients, they must feel safe to be able to tell them; then they engage with us which is fantastic…[Clients are disclosing to teachers] because they don’t know who to go to and they’re referring them straight to us. Or the teachers will see the bruises. University students that are doing English, not just necessarily AMES, but a lot of them come through that way. (Family violence service provider, Tasmania)

I’ve had two particular clients who have been at English school together and have talked; one rang the police for the other, and vice versa. (Law and justice service provider, Victoria)

Women participating in focus groups and key informants highlighted that increasing women’s English language skills had benefits beyond women being able to communicate their experiences of family violence to service providers. Women also developed confidence and social networks, which increased their ability to seek help and access services, but also meant they were in a better position to establish a new life upon leaving a violent partner.

[It’s about] letting them learn that there’s more to life than putting up with him and allowing them to walk out the door, not to be forced to do that. As I said, with a lot of the immigrant women, English classes, getting them into the
community so that they talk to others. (Law and justice service provider, Victoria)

All people migrating to Australia through the Humanitarian Programme have access to government-supported English language training. However, men from a family will often access this training before the women do so, in many instances because the set hours of the English classes are incompatible with getting children to and from school or providing after school care, or because there is limited child care available. This structural barrier to English language training has an impact on the dynamics between men and women in families, increasing men’s power and in situations of family violence, increasing men’s ability to control women’s access to information and social networks. The women we interviewed placed a high value on information and knowledge, and recognised the injustice of their exclusion from learning on the basis of their gender. Immigrant and refugee women noted that ensuring they had the opportunity to learn English would support a range of positive settlement outcomes, in addition to being an important component of an effective response to family violence.

Figure 10 “The Power of Knowledge” by Ruby

I once lived in a world in which women and education were not valued. Women usually had two choices: marry by choice or by force (arranged marriage). The tiara worn back to front symbolises my bravery at standing strong against arranged marriage. I wore black as a symbol of duality. Black is the colour of mourning, and I mourned all the lost opportunities education could offer me. But black is also the colour of graduation. I never stopped believing in the power of knowledge. Eventually, I went back to school and got my diploma. I stand in a public library because books were once denied me. “Women should not be smart”, I was told. But I would go to the library in spite of such beliefs and travel to the past to find my ancient female ancestors and have a conversation. Hypatia of Alexandria, my favourite. Their spirit gave me strength, the opportunity to access knowledge and courage.
Women’s experiences with services

In the testimonies of the women we interviewed, it is apparent that the overlapping contexts of immigration policy, family and community pressures, and the strained service system (including place-based issues), had particular effects on their experiences when accessing services for support. When accessing help, many women felt they traded the pressured home environment for the pressured service environment. Due to the restrictions caused by immigration policy, communication barriers and lack of information about services and rights, women must weigh up whether they are better off enduring violence or attempting to seek support from an unfamiliar system, risking jeopardising their visa status, and losing access to family income, housing, childcare, and community and cultural connections. Taking the risk and contacting services is made all the more challenging as women face further unknowns about whether services will be able to cover the costs of their basic necessities, understand their particular needs and concerns, offer fair and equitable treatment, and provide accurate information about their rights and options in their own language.

This section will outline women’s experiences with the services they accessed, including family violence services (crisis, refuge, outreach and counselling), police, courts, child protection, migration and settlement services, housing services, healthcare services and Centrelink. To frame these experiences, we note that interviews with women and with key informants highlighted that immigrant and refugee women rarely experience the family violence service system as a “system” with clear entry points and linear pathways. Rather women often described their confusing encounters with a range of different services, and the fact that they spent an inordinate amount of time travelling from appointment to appointment for uncertain gains.

Key informants recognised the complexity of immigrant and refugee women’s interactions with services, and emphasised the importance of “warm” or “active” referrals for supporting women to access the help they needed. Warm referral practices involved sending as much information as possible about the woman and her children’s needs to the receiving agency, including a family violence risk assessment, information about the whereabouts of the person(s) using violence, the welfare of the children, immigration matters that needed resolving, and interpreting requirements. This also involved explaining to women, who were often unfamiliar with Australian service systems, what they should expect from the service they are being referred to and, wherever possible, the name of the person who will contact them after a referral is made. “Warm” referrals helped to facilitate transitions between services, eased fears that many immigrant and refugee women held about what might happen next as they accessed different types of agencies, and reduced the need for women to repeat details of traumatic histories. However, as women’s experiences outlined below make abundantly clear, such positive practices were not always seen.

Family violence services and refuges

Most of the women interviewed had some kind of interaction with specialist family violence services, including crisis response lines, short-term accommodation, refuges, local outreach and counselling services. Many of the women interviewed had left their family homes fearing for the safety of themselves and their children. Those that had contacted crisis lines reported generally positive experiences with the responses provided by these services; however, once they entered short-term accommodation and refuge, their experiences were mixed. Placement in short-term accommodation (i.e. motels or short-term refuges for 2 to 7 days) was a feature of many women’s experiences in Victoria and caused a great deal of stress. Women described leaving the pressured environment at home and entering another pressured environment, where they were asked to make life-changing decisions about their next steps in a very short space of time. This was reported by women as particularly challenging where they had concerns about their visa status, worries about having no income, language barriers, limited information about legal rights and housing options, profound feelings of conflict about having left family and community ties, and an overwhelming sense of isolation.

They were good but then they said that you would only be here 2 or 3 days and then we have to move you to a regional area maybe and then you can’t stay here for long. You have to think about what you will do, what you are going to do about your relationship, are you going back or you want to separate or filing for divorce and things like that. But then I realised there was lack of support and information. Who do I talk to? What your rights are? What can I do? Then it was too much pressure for me and I was there thinking did I do the right thing leaving home or not? If I had support and guidance and help maybe I wouldn’t have gone back. (Karen)

When women with temporary visas were awaiting outcomes from family violence provision or complementary protection claims and were placed into longer term shelters, they described becoming either stuck in the refuge for long periods of time (sometimes up to 2 years), or being shuffled around accommodation services as a direct result of their visa restrictions.

I spent 2 months in the shelter and I had to move because it’s only available for 6 weeks. I moved and now they wanted me to move too because it’s available for 3 months and I spent 5 months there…we’re not allowed to apply for housing because of my protection visa. (Fatima)

Women interviewed gave mixed accounts of living in longer term
refuges, ranging from positive experiences with intensive case management to feelings of abandonment, isolation and lack of assistance. Positive support in refuges included assistance to access English classes, referrals and transport assistance to legal services for family law or immigration advice (including transport from regional locations to access specialist legal services in the city), assistance into post-refuge transitional housing units or longer term private or public housing, advocacy with police to obtain intervention orders, help with childcare and shopping, care for women’s cultural and religious needs (such as obtaining halal food) and provision of longer term support as required after women left the refuge. At the other end of the spectrum, some women reported experiences where they were provided little or no support within the refuge, no interpreters for communication and little information or assistance about other services and rights available to them. In these circumstances, women often did not realise that the staff were family violence workers at all and thought they were volunteers, cleaners or building caretakers.

The communal setting of many refuges was a particular challenge, especially for women who were stuck in the shelter system for long periods awaiting visa outcomes. Women reported ageing buildings with no locks on doors and occasions when other residents had stolen money from them. Some women found sharing accommodation with women who had drug and alcohol problems, engaged in sex work, had severe depression or made suicide attempts challenging. Some women were particularly concerned about the effects of long-term shelter living on their children as well as seeing other children suffering from trauma and upheaval due to family violence.

I was in refuge for 2 years. Some people used drugs and alcohol. I came with my two kids, so the government should put kids in a safer part of the refuge. (Gul)

For women who did not go to a refuge or who sought further assistance after having left a refuge, some accessed family violence outreach and counselling services, including those provided at a local level or through the state-wide support provided by InTouch Multicultural Centre against Family Violence in Victoria. Women reported generally positive experiences with these services at all research sites and noted that they were provided with a range of support, including public and private housing options, material aid for basic necessities, referrals for external or in-house legal

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Figure 11 “The path” by Georgina

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I took this photo after I came out from the social worker’s office. I just needed to focus on the view to feel some sense of peace and happiness. I know that I need to tell them what had happened so they can help, but each time I relate to the incidents, it is emotionally draining. Seeing the nature’s beauty is a way of forgetting lots of stuff that is going on or is about to happen. It can be overwhelming with two kids and doing everything on my own. It is also an emotional struggle to go through the system. But I guess everyone has to go through a path—whether it’d be smooth or rocky you still have to persevere and go through it taking one step at a time.
advice, assistance with family law and intervention order matters, and referrals to counselling. Women who accessed InTouch reported receiving these kinds of supports plus the valuable addition of specialist migration legal assistance to handle their visa matters. Indeed, many key informants also reported that they tend to make referrals to InTouch for precisely this reason, describing the service as “holistic” in their response to immigrant and refugee women.

A few women also reported that they had positive experiences provided by peer support groups set up specifically for family violence survivors from culturally and linguistically diverse backgrounds. They described benefits including solidarity with other women, education about family violence, help with feelings of depression and anxiety, support for parenting, and understanding that family violence occurred across all cultures and backgrounds.

I really did not think that I could believe it when I got there that I would be in a room full of people with the same or similar things that have happened to me. I never believed. No, I just never believed that there would be a whole room of women talking about what happened to them. I thought it was all behind closed doors, kept behind closed doors. (Marnie)

Key informants involved in one of these groups identified the importance of providing peer support to women from diverse cultural backgrounds, particularly when they were not ready to end relationships or take legal action.

We designed a space that women could come to and share their experience of violence, link in with friends and also get some theoretical knowledge about family violence and the way things worked as well. It was challenging in that, because English was second language to a lot of people, we couldn’t have people who needed an interpreter because neither of us had funding to be able to supply that and then the level of English that people had differed. But the social supports, that regardless of what we said or the information we gave, how well that they were socially supported made a difference on whether or not they left or not. (Law and justice service provider, Victoria)

Unfortunately, support groups specifically for immigrant and refugee women are very rare in Victoria and not provided at every research site. While there may possibly be this kind of support in Tasmania, it was not identified by key informants in this study. As such, when women have to move for safety reasons or to seek housing and work opportunities, they lose the connections and support provided by this type of group. Ideally, these types of supports, which remove barriers for immigrant and refugee women to access help, should be more widely available.

Where women did describe negative experiences with family violence outreach or counselling services, this was primarily a result of the high demand on these services which limited their capacity to work with women who were not prioritised during triage. Some women who were able to access these services reported challenges with getting appointments with busy caseworkers, while others were told they would go on a waitlist, but never heard from the service again. Some women reported being turned away because they weren’t sure if they wanted to end the relationship with the perpetrator:

They called to talk to me and sent a taxi to pick me up, but I kept protecting my husband so they got confused. They couldn’t help me and sent me back home. I was shocked when I heard they would send me home. I got faint and they called the ambulance. It was so hard to get into the services. (Hien)

Police

Most of the women we interviewed reported that interactions with police generally occurred during times of crisis when they felt in imminent danger. Some women described multiple interactions with police during or after specific family violence incidents, and others described ongoing interaction with police regarding intervention order breaches and matters involving criminal charges.

In both states, women described very mixed and inconsistent experiences with police. Women characterised positive encounters as experiences of feeling believed, trusting police members and feeling that their protection and safety were being taken seriously. Women described a range of practices that helped them gain confidence in the police, including demonstrations of care towards women and children following an incident, such as bringing food; assisting them to get to a refuge or referral to local family violence services; taking them to the hospital to attend to injuries; putting children on intervention order applications; and acknowledging women’s courage to make contact with police.

I wanted to report what had happened to me and she listened to me. She was great and was doing everything so I didn’t have to worry…she helped me trust them and believe they would protect me. (Sara)

Negative experiences with police often related to failures of police to attend to their operational protocols in regard to family violence and integrated systemic responses. This included not providing interpreters, not making referrals to family violence services, removing women and their children from the home rather than using police powers to remove the perpetrator, not retaining documented evidence of violence when women followed up on police actions, not allowing women to gather
their belongings when leaving the home or assisting with retrieval of belongings following an incident, not taking action on outstanding warrants, not turning up at magistrates’ court for police-initiated intervention orders and not attending to women’s injuries. Several women reported that police attended their homes and did not remove the perpetrator following violent incidents, leaving them vulnerable to further harm:

The police attend and they tried to talk to me. There wasn’t an interpreter attending during that time. I tried to express about the situation and they told him not to try this again. The police left us there. Then the weekend, the Sunday, because I did this he wasn’t happy so he was saying, “How comes you did this? You are my wife so you shouldn’t do this.” He was upset with the situation. “How come you did this? You shouldn’t do this.” Monday morning, I said, “I’m going to drop the kids to school.” I left and I dropped the kids and I went straight to the police station and I told them I’m not going to go back here again…at the police station they presented an interpreter. The interpreter tried to explain how I spent the weekend, how it was for me because I contacted the police and he [the perpetrator] was so upset. He [the perpetrator, angry because she had called the police] tried to hold my shoulder and shake me, and sometimes grab my hair and pull my hair. (Odette)

Some women felt that they were only able to receive a police response if they brought an advocate with them:

I had a really bad experience with the police as well in Australia because the very first time when I went to the police station I asked for an intervention order, that my husband was threatening me. They said, because at that time I was at my sister’s place, “You’re safe already because you are at your sister’s place. We can’t give it to you. You can go to court and apply yourself.” I was really shocked. How could they say that? Then I talked to [family violence worker] and she said, “You go again and tell them your whole story and show them your discharge summaries and your doctor reports.” I was having counselling and I was on medication from my psychiatrist. They did not even see the documents. They said, “No. No. You have to go. We can’t do anything.” Then again I talked to [family violence worker] again and then she came with me to the police station and then they listened that time. When she came they listened finally. (Aarti)

Women also had mixed experiences in regard to police action on breaches of intervention orders. While non-action on breaches could be related to evidence and merit issues in individual cases, for some women it was frustrating to have an intervention order, make a report and find no result. Furthermore, some women had experiences with reporting breaches and observed how the perpetrator manipulated the circumstances to appear as though he were the victim in the matter.

Some of the concerns described above may be a result of the nuances of particular family violence circumstances, under-resourcing at some stations, lack of training or lack of leadership at some police stations to appropriately follow procedures in responding to family violence. Women also perceived, however, that some of their negative experiences resulted from the attitudes of individual police officers. Women reported situations where they felt that police officers were colluding with the perpetrator, expressing beliefs that the perpetrator should have access to children and trivialising and minimising their fear.

We [Ruby and her sister] did eventually have to go and we turned up at the police station. We were absolutely and utterly in fear and they sent us back home. They actually found it amusing enough to laugh at us. We were pretty much imprisoned in one house. They [the men in her family] controlled our movements and pretty much wanted to capitulate to what their norm was. We held out. It was like being held up in a fortress. I mean everyday life, everyone walking around you, no one knowing the better what was happening. And, the police telling you, “Go back home.” (Ruby)

The implications of these negative experiences with police resulted in some women losing faith in the capacity of police to protect them, which allowed the perpetrator to extend their abuse for longer periods of time and resulted in some women deciding to never contact the police again.

The pro-arrest and pro-prosecution policies in Victoria and Tasmania were perceived by some women to be a positive response and for others it was a mixed or somewhat confusing experience. Some women described a sense of relief as the police took responsibility for their protection by attending to their safety needs, putting intervention orders in place and arresting the perpetrator.

I go to the phone and I call the police. Yeah, he and his mum don’t think I would call the police. Then the police come and I went to the court…the police applied for me. I just went to the court. The police did everything because the ladies came in and they saw everything. The hospital checked me and my baby too. From that day they took me out of that house. (Linh)

Key informants who held views that pro-arrest responses were a valuable intervention in family violence felt that this was a particularly useful strategy for immigrant and refugee women who might be isolated and have little information about what constitutes family violence and how to access support for safety
and legal rights.

If anything I think it’s probably a good thing for CALD women, because it does show them that domestic violence is a crime in this state. Domestic violence is a crime; not physical violence, but emotional abuse, psychological abuse, financial abuse. All of those things are a crime under that legislation. By having that pro-prosecution, that really does put into sharp focus that it’s not acceptable. I think that sometimes people need to hear it from outside, because they’re hearing a lot of messages from partner about abuse being acceptable.

(Family violence service provider, Tasmania)

For some women, however, the pro-arrest response was unexpected and brought mixed feelings, and was especially confusing for women who had previously interacted with police where no action was taken:

I went to the police to report the last incident, and that’s when she said to me, “It’s a no-no. You’re not going back home.” I said, “What?” She said, “Yeah. We are going to go and issue him a warrant.” It just happened so quickly that I was lost. Honestly, I was confused with what’s happening here. I just went to report an incident. A year prior to that my husband had kicked me and I went to report it and they dismissed it…she just said, “Look, you need to go to the magistrates’ court and apply for an intervention order.” To me it was too much hassle. I was expecting again that reaction when I went to report. (Lucy)

Key informants working with refugees, in particular, held additional concerns that the pro-arrest, pro-prosecution response could be a significant deterrent for refugee women who had previously experienced corrupt policing and police violence in their country of origin.

Figure 12 “Door” by Kelly

Everyone knows my door. But the thing that worries me most is that he knows my door—he knows where I live. I tried to keep it from him but through the court process and stuff he found out. Behind my door I would like to feel safe with my family. I like the colours of my bricks because they feel very warm. Even though I don’t like living there.
There’s long been the difficulties with our particular Safe at Home program and the way that police go in. It can mean the woman identifying more with the perpetrator than with the police because of how police are in their uniform, and the whole thing and not necessarily getting to interpreters to begin with. (Settlement service provider, Tasmania)

A large majority of migrant women came in due to police applications so they weren’t…self-applications. It means that they called the police with the thought that the police could tell the perpetrator off, give him a warning. The majority didn’t know that there was actually something that was going to happen as an outcome. (Law and justice service provider, Victoria)

**Magistrates court and intervention orders**

Women described both positive and negative experiences in the magistrates’ courts in Victoria and Tasmania. Some women ended up attending court due to police-initiated intervention orders and some made their own applications.

The most positive aspect of women’s experiences in magistrates’ courts was the support provided by a court support worker (including those employed by the court or attending the court from a family violence service). Women described court support workers providing information about court processes and procedures, explaining conditions set out in intervention orders, assisting with safety planning, making referrals to family violence services, providing information about victim’s compensation, and advocating for children to be placed on orders. Some women also reported instances where court support workers contacted police to assist with reporting perpetrator breaches of orders, and provided information about where to seek advice for immigration matters. Where women did not receive court support, their experiences were quite the opposite. They described frustrations with not understanding court processes and procedures, not understanding the purpose of the intervention order and not receiving information about family violence or legal services. Some women without court support felt quite isolated and unsafe in the court environment as they dealt with a perpetrator’s intimidating behaviours.

In the court room, some women reported positive experiences with magistrates who made clear they believed the woman, recognised her fear and took action to hold the perpetrator accountable; however, some women felt they were disadvantaged by lengthy processes and multiple hearings as perpetrators contested order applications and made cross-order applications against them. Women felt this was a blatant intimidation tactic and caused them to lose faith in the justice system.

Then again I go to the court and this time he put a cross-application against me and said that I threatened him…I’ve had an extension of IVO. Just exactly after 2 weeks how can he put blame on me? After 2 weeks? My question is to the magistrate, how you can give this person a claim—to put a cross-application against me? (Jaya)

One woman reported a particular concern where she felt that the magistrate was unable to understand the implications of issues happening in her country of origin that affected her safety and wellbeing here in Australia.

In India, there was a case against [perpetrators] that said it was criminal…if there is a case going on and they’re not going back to the country, they should listen…it shattered my confidence, because I thought if they [magistrate] couldn’t trust me, nobody else would. (Mannat)

Key informants reported how delays caused by the perpetrator in the intervention order process further impacted on women’s family violence-related visa claims, as they had to wait through contested hearings hoping to get a final outcome on the intervention order, which would be an important piece of documented evidence for the immigration matters:

The other party is contesting all the time and we do have cases you have to put off for a year. On and off, on and off, because he is contesting and he’s not happy with the allegations. If she does not succeed, I need to look for the other options…link them in with professionals like a psychologist or social worker and gather all these reports [for the visa application] together. It’s a lot of work but if I don't do that, I may fail them. (Family violence service provider, Victoria)

Following their experiences in court, women had mixed experiences with the effectiveness of intervention orders. For some women, the order was a powerful tool allowing them to stand up for their safety and for the protection of their children:

It would probably get dragged on. We'd probably still be fighting and he'd still be hurting the kids and stuff, but because I stood up and said no, that's my big no, that's my big statement…I need assurance that he's really committing to it because I don't know. Anything could happen. That happened just like that. Over dinner we had an argument and it just went boom and it caught me off guard. What was that for? That happened so it could happen again. I need assurance now that whatever happens, no matter how angry you are, you aren't going to be hurtful or be crossing the line. (Frida)

For others, where the perpetrator was inclined to disregard conditions on the order, it mattered little whether or not the order was in place:

I don't need an intervention order now because it doesn't work. I already saw how many times they break it; it's just...
on the paper. I can’t trust it. It’s just wasting time. (Helen)

These experiences are generally similar to experiences of non-immigrant women; however, in some contexts, immigrant and refugee women experience a high level of pressure from the perpetrator as well as family or community members to vary or revoke orders. This was observed particularly by those working within courts and dealing with a high volume of intervention order matters involving immigrant and refugee women.

[T]he men would still, regardless of the order being made, regardless of the police saying “This is our order and this is what we want, not what she wants”, they would still be pressuring her to “get rid of it, get rid of it, get rid of it” because it’s such a shame for it to be hanging over his head. (Law and justice service provider, Victoria)

Child protection

While anecdotes describing difficult interactions with child protection, and fear and other negative perceptions of child protection services were common in focus group discussions, only one of the women interviewed reported experiences with child protection in Victoria and none of the women we met described any child protection involvements in Tasmania. This was likely due to the fact that most of the women we interviewed had found a way to exit the relationship before any involvement from child protection services. The one woman who described her experience with child protection was given an ultimatum by the child protection worker that she must leave the perpetrator and go into refuge or risk the removal of her children. Key informants who have worked with immigrant and refugee women with child protection involvement reported that the pressure to leave or take legal action against the perpetrator was a common experience for many women. While many key informants felt that it was important to support women to understand the role of child protection in ensuring the safety of children, some felt that child protection often had a victim-blaming response that did not necessarily understand women’s community and cultural contexts and placed all protective responsibilities solely on the mother, while ignoring interventions that child protection could make with the perpetrator and other family members.

In this image, my son’s hand looks dead because when I was going through the court system I felt like I was being forced to let him go. The advocates were telling me that I had to let go. The cold hand represents how you feel walking through the system with your child. And knowing that any time my ex could decide he wants to have a crack at being a dad again, and I just have to let my son go. You are made to feel like you are making trouble and being uncooperative by not wanting them to see their kid, but it wasn’t like that. It was because I was scared.
Child protection is very big and scary when you involve them. Sometimes they forget it's not the victim who's putting the children at risk and it's actually the offender. I think it could be easy for women who don't have a good grasp on English or the culture to get the wrong idea and feel blamed. Even lots of Australian women feel blamed. (Family violence service provider, Victoria)

Key informants also observed particular challenges for women with both immigration issues and child protection involvement, where avenues for enhancing women and children's safety appeared to work at cross-purposes:

We're at the stage where 12 months is up and the intervention order is lapsing. She's still waiting for her visa to go through, so child protection want her to apply for another intervention order, to be seen as protective so they’ll step out her case… her legal advisors say not to apply for an intervention order that might possibly be turned down because it’ll look bad for immigration, but child protection is saying that if she doesn’t apply for an intervention order, they’ll say she’s not being protective and hang around with the threat of taking the children away. I understand each organisation is trying to do their best, but this is at cross-purposes. Can you imagine how stressful that is? Either they don't get their visa or they lose their children. (Family violence service provider, Victoria)

Family law

Most discussions regarding the wellbeing and protection of children centred around experiences in the federal family law courts. All of the women who had experiences in the family law system reported lengthy involvements, sometimes over several years, as perpetrators vexatiously utilised the system to exercise control over the women and their children. Women described experiences where, despite the documented evidence of family violence and the presence of intervention orders that included children, the family law court still granted the perpetrator access to these children and put women in ongoing contact with perpetrators.

He just chose to bully me through the legal system, because they’re allowed to do that. They’re allowed to still abuse you and bully you and do whatever through the law… It [family law] fails us and the children, because the children are re-traumatised in having to do all these steps and we as mothers who are trying to keep them safe. (Julie)

Women also reported family law outcomes where their children were forced to spend time with perpetrators who had not only previously abused the woman but continued to abuse and manipulate the children during ongoing contact. One woman reported that she informed police and the family law court about physical violence her child was experiencing during weekend visits as well as extreme threats of violence made towards herself, but this did not result in any change to the access arrangements. Another woman spent many months trying to recover her child from overseas after the perpetrator did not return her child after a holiday in their country of origin. The child was eventually returned after she contacted legal and family violence support services, yet despite this major breach of a pre-existing intervention order, the family court continued to allow unsupervised access.

Women also reported instances where they were not provided with interpreters in the family law court and were unable to express their worries about the perpetrator's behaviour. Some felt that the family consultants who wrote reports for the court were not able to sufficiently understand how the family violence dynamics impacted on the family law matter. This concern was also described by key informants who regularly supported women through these situations:

If they understood family violence then they will know the man will come out strong and positive and say all the right words. So it shows a lack of understanding when they start blaming the woman and call the woman vindictive. They ask questions about the family and the woman’s talking about it and then they’ll make a statement like, “She’s caught up in taking revenge” or she has not moved on and all those things. (Family violence service provider, Victoria)

At the same time, key informants recognise the systemic limitations in the family court to properly assess and respond to family violence:

They need to first of all train the judges, the barristers, the legal system and the court report writers. They need to be trained in family violence for goodness sake… to be fair to the report writers, they meet the woman for 1 hour, they meet the man for 1 hour, they meet the children for half an hour with each of them and they have to write out how they should be living their life. (Family violence service provider, Victoria)

Migration and settlement services

Very few of the women we interviewed had accessed support for family violence through migration and settlement services. Settlement services primarily provide support to refugees in their first 5 years in Australia, whereas many of the women we interviewed held other types of visas and were therefore unable to access these services. Some key informants thought that settlement services should be resourced to provide support to people on non-refugee visa types, such as partner visas, tourist visas and student visas, to ensure they are linked into settlement support and referral pathways to other services, including family violence support.
Several focus groups with refugee women revealed that while they were not aware of where to seek help for family violence, many did think that they would disclose family violence concerns with their settlement case worker or a community or faith leader. This was corroborated by key informants in settlement services who received such disclosures and tried to provide information to refugees about family violence to assist with informed decision-making.

Yeah, so we have a lot of discussions about what’s acceptable in Australia and what’s not acceptable. And, that there’s different types of violence and there’s also coercion and threats and all that sort of stuff even, other than violence. Yeah, we have lots of discussions about, I guess, you know, what the systems are in Australia, what the law is, and what protections there are for women. But also I guess, how they’re seeing it and what their perception of it is as well. (Settlement service provider, Victoria)

Many key informants felt settlement services were less likely to receive disclosures of family violence because refugees are only able to receive migration and settlement services for their first 5 years after arrival. Key informants reported that refugee women, who often had particularly complex trauma histories, might only disclose family violence many years post-settlement.

[The settlement worker] can only assist someone who’s been here for 5 years, and we have clients who might have been here for longer [and] their only contact is with the perpetrator of violence. So for them, effectively, they are where they were when they arrived. They’re not 5 years down the track. (Law and justice service provider, Victoria)

### Housing services

Very few of the women interviewed had attempted to access public housing services either because they were already safely housed with supports after leaving their relationship, or were ineligible for public housing because of visa restrictions. For this reason, many women dealt with homelessness and unstable housing situations for long periods, including while living in women’s refuges, with neighbours, in rooming houses, or share-housing in private rental accommodation. One woman interviewed in Victoria who did eventually get into public housing after living in a refuge was happy with the outcome, reporting that she was finally “feeling safe now”.

Many key informants described housing stability and affordability as both a significant barrier for women seeking help for family violence, and also the reason that brings many women back into relationships with perpetrators of family violence.

It’s a very significant factor and then when there are income issues, especially around refugee or migrant women. It is really difficult. It might be family and friends quite often is a reason why women return back home because of the lack of suitable ongoing accommodation. (Family violence service provider, Victoria)

### Health services

Several women had interactions with general practitioners while they were dealing with family violence. In most instances, the GPs offered referrals to psychologists as a result of these disclosures. In only one instance did a woman describe that a doctor referred her to family violence services. Other women who disclosed to GPs, some of whom had injuries as a result of violence, only received medical treatment and no further inquiry or assistance.

He hit me so hard my whole face was bruised and my ear was bleeding all night… the next day when I woke up my pillow had some blood on it and my ear was really painful. When I went to see the doctor, because it was a walk-in appointment, he didn’t say much or care much, he just made the report that the ear was perforated. He goes, “How did it happen?” I said, “My father slapped me.” He just shook his head in a regretful way that that was bad. (Wahida)

One woman described how she wanted to tell her GP about the family violence but didn’t feel that the clinic environment was conducive to disclosure:

With the GP, you go there and sometimes if you want to talk about something I feel I can’t because there’s no time. She’s always in a hurry. You sit waiting for an hour for her but when you go in, it’s ten minutes and she wants to do things quickly because she’s running behind. There were many times when I felt like I wanted to talk but because nobody is really asking you what you do or whatever you can’t really. (Hanna)

Another woman was forced to have an abortion by her partner and his family, and was never allowed to see her GP or hospital staff alone. This highlights the potential missed opportunity to intervene with family violence in the healthcare setting, particularly if health professionals are not aware of how to notice the signs of controlling behaviour and implement practices to receive disclosures privately.

They [family] booked the appointment and everything, so I was convincing my husband that I didn’t want to go for an abortion and it was my baby. I was crying and saying I could go back if they couldn’t afford the baby. I’d go back to my country and stay with my parents, but I couldn’t kill my baby. He didn’t listen. I was crying and everything. For the confidentiality, they have to take a signature and they took me in the room. I said to him I wasn’t going to sign but my
husband said I didn’t know English and he understood a bit, so he accompanied me to sign it. (Mannat)

Some key informants highlighted the important role of GPs in the family violence response, particularly for immigrant and refugee women.

I think GPs are crucial. Amongst many cultures, it’s very acceptable to go and see your GP… if a woman was to say she was going to talk to the family violence people about what’s going on at home, I don’t think she’d necessarily be validated in that. If she said she was going to talk to the GP, they’d assume she’s not well. We expect a lot of GPs in a short space of time, but that’s because they’re so central. (Settlement service provider, Victoria)

Centrelink

For the women who had eligibility to access Centrelink for income support, several reported that they had positive experiences which increased their independence and relieved financial pressure.

Right now I’ve started on with the Centrelink payments. When we separated he was still calling me at the start harassing me and all that so I said, “I’m done.” Once I started receiving Centrelink payments I started paying for everything, for the kids, day-to-day spending. Even the uni fees and all that…we can get by. We are better off with the Centrelink payments. I think that came as probably a blow to him that we were able to survive without him and we’re actually doing better and we’re not asking for anything. (Frida)

A few key informants described how they developed positive relationships with Centrelink social workers to make sure that immigrant and refugee women were able to access entitlements without difficulty.

I referred to Centrelink a lot and we had a direct referral pathway there where I could actually email a social worker my file to say, “This woman has English as her second language but can we start special benefits, can we get something happening for her” so it cut down a massive hole for them in having to turn up at a Centrelink office trying to explain what they’re there for and get an appointment. (Law and justice service provider, Victoria)

All of the refugee women interviewed, most of whom were in relationships with their partners, received family benefit funds from Centrelink and some described tensions arising where the women in the household received entitlements for herself and the children, while the men received just their own entitlement. Women had conflicting feelings about this, where on the one hand, they felt that perhaps this arrangement was unfair for men, but on the other hand, it gave them control over the money to make sure that their children’s needs were met.

Because he complains about the money. You use money, you buy things, because I buy food and what my children need. As a mother, I know that I need to save money for my children. I don’t use drugs with this money, I don’t use alcohol or anything. That’s why I not agree with him. (Naw Sher)

A few women reported some negative experiences with individual Centrelink workers where they felt reprimanded for accessing income support or pressured to find work while still dealing with the mental health effects from experiences of traumatising violence. Several key informants reported that the most challenging aspect of supporting immigrant and refugee women with accessing Centrelink was the support needed to deal with the paperwork. While interpreters and specialist migrant support officers were provided in some instances by Centrelink, the key informants felt that it was more often the case that the work of helping women access these services fell back on them. Key informants described spending hours working through language and literacy barriers trying to assist women with filling out forms and ensuring that information provided would help them access their entitlements.
Prevention of violence and community engagement

Recent analysis of the international literature has informed the development of a shared framework for the prevention of violence against women and their children by key Australian agencies (Our Watch, Australia’s National Research Organisation for Women’s Safety, & VicHealth, 2015). This analysis has identified gender inequality as the key driver of violence against women, and that primary prevention therefore requires a focus on the achievement of gender equality. Our research found that gender inequality, as it intersects with other factors such as racial discrimination, place, and immigration policy and legislation, plays a central role in the perpetuation of violence against immigrant and refugee women. One key informant noted:

The gender norms really need to be addressed before we could talk about family violence, and expectations of your gender roles, and what is and isn't okay, and commenting on women and those sorts of things. (Law and justice service provider, Victoria).

There have been a range of primary prevention programs conducted with particular immigrant and refugee communities over recent years; however, funding for these initiatives has often been on a one-off basis, and restricted to specific geographic locations, rather than available across Australia. In addition, the piecemeal funding has not extended to rigorous evaluation of outcomes or investigation of impact over time.

Focus group discussion participants in Victoria and Tasmania had infrequently encountered these programs, and many service providers too had limited knowledge about or connection to these prevention efforts. This does not mean that these interventions were not effective, but does reflect the challenge of ensuring that primary prevention of family violence against immigrant and refugee women receives sustained support, is on a scale commensurate with the desired change and reaches a range of communities in diverse settings, including regional centres.

While there was limited discussion among the women and key informants interviewed about primary prevention programs, there was an acknowledgement of the importance of engaging immigrant and refugee communities in order to build their capacity to address and respond to violence early on, rather than at a crisis point. There was discussion about the need to provide education and information to people within communities, and targeting both women, men and young people in different ways and for different ends. Women interviewed highlighted that norms sustaining gender inequality also affected their relationships with parents, parents-in-law and their children. Therefore, primary prevention and early intervention programs also need to work across generations.

Community engagement: Information and education

A number of the key informants interviewed described engaging people from immigrant and refugee communities on the topic of family violence, primarily through the provision of legal education workshops. Key informants recognised that immigrants and refugees, particularly those who were newly arrived, may not have had opportunities to find out about Australian laws relating to family violence. Key informants from legal services and settlement services reported that they provided information and educational workshops about local laws, aiming to build awareness in the community about family violence-related legal issues. While some key informants found that such workshops seemed to have the effect of raising awareness about family violence in the community, very few key informants spoke of such legal education having a positive impact on immigrant and refugee women's capacity to seek help, or on the attitudes of community members toward family violence. Several key informants expressed concerns that the provision of information about family violence and the law was mistimed for new arrivals, or irrelevant due to language issues when interpreters were not included. Some key informants also noted that information was often delivered in a didactic style, with very little discussion or outcomes or investigation of impact over time.

Some services addressed this by employing bicultural workers, or training up community members as mentors who could provide information and referrals.

We worked with the Indian and Sudanese communities about getting community members upskilled on knowledge of family violence so that if people were coming to them, they could say, “here are your referral sources,” and not answer with misinformation. (Law and justice service provider, Victoria)

Even though such bicultural community engagement strategies could be successful for disseminating information, the funding to maintain these initiatives and keep community members engaged was often not sustained. Some key informants felt that the fragmentary nature of funding for short-term prevention and community engagement projects could actually engender mistrust within immigrant and refugee communities, noting that this gave rise to perceptions that agencies didn't really want to collaborate and understand family issues from other points of view. Key informants also noted that if their service could
not maintain links with community members and community organisations in an ongoing manner, it made it harder for women who sought out those services to know what would happen or who they could trust.

We’re getting in at the tail end instead of trying to educate…it’s all very well to send people out to various communities and do all the talks telling women that they don’t have to put up with this, but then where do they go? When she leaves, I’ve told her all this stuff and we’ve given her the pamphlets and we give them all referrals, which is fine, but I wonder sometimes if it ever goes anywhere from there. (Law and justice service provider, Victoria)

Key informants were of the view that current widespread media coverage of family violence was a positive development for raising the profile of the issue nationally; however, some expressed concern that mainstream marketing approaches used in prevention campaigns may not be understood or considered relevant to women of immigrant or refugee backgrounds. Some of the key informants we interviewed thought more could be done to include people from a diverse range of backgrounds and provide information in a range of languages:

There are so many ads about domestic violence; it’s very powerful, very empowering for women, to be able to see that…I thought “Gee, I hope people understand that.” Maybe if they put subtitles into it. It is in English; subtitles would be great in different languages. (Settlement service provider, Victoria)

A number of key informants noted that efforts to provide information and education for the primary prevention of family violence needed to challenge rigid gender norms in relation to financial matters. Financial abuse was a significant feature of women’s testimonies. Many women associated changes in financial independence, for women and for men, and changes in the control of family finances with the experience of different forms of family violence. Migration had led to increased financial independence for some women, but for a number this was resented by the men in their lives:

My husband doesn’t want people to know that I’m bringing money in. It was a big problem because he’s the boss. (Bella)

Service providers also noted that financial matters were a key source of conflict in the immigrant and refugee families they worked with, with the observation that “Centrelink gives money to men and women and that is seen by men as them losing face” (Settlement service provider, Tasmania) being shared by many key informants. The centrality of financial independence, control and abuse to immigrant and refugee women’s experience of family violence is not always reflected in prevention programs designed to target immigrant communities.

Our research reveals the tension inherent in recognising the impact of rigid gender norms on some immigrant and refugee women, while simultaneously not stereotyping all or entire immigrant and refugee communities with respect to gendered inequality. While gender inequality across Australian society underpins family violence, some key informants we interviewed conveyed the common assumption that immigrant and refugee communities bring with them a sexism that is attributable to their migrant “culture” and that this is more difficult to change than in the general community (Volpp, 2011).

Members of immigrant and refugee communities who participated in the project were acutely aware of problematic stereotyping, and this weighed heavily on some of the women interviewed. Women were very conscious of how their cultures and religions were perceived in the eyes of others, and spoke about feeling protective of their cultures or religions in the context of external judgement.

To make something clear, it’s about violent men. I need to defend my religion. People think Muslim men are violent but it’s not about religion. (Amira)

In the face of such stereotyping, women spoke about feeling hesitant to speak out about the family violence that had been perpetrated against them because they would be seen to be betraying their communities, or speaking on behalf of their ethnic or cultural group, rather than as individuals.

If my situation as a child of a migrant wasn’t stigmatised I wouldn’t have feared speaking out. You get classed a traitor. Then you’ve got other stigmas. You’re a traitor and an off-loader. You betrayed them. You go from one stigmatisation where you embody everything about that culture. That’s a bit of a load to carry…I’m supposed to represent everything people say about Greeks. (Ruby)

Key informants and community members felt that efforts to engage communities about family violence needed to acknowledge the impact of negative stereotyping. Focus group participants and women interviewed noted how communities’ experiences of prejudice and discrimination on the basis of ethnicity and religion intersected with gender inequality in women’s lives, and that family violence prevention initiatives needed to acknowledge this. Without due acknowledgement of the impact of racism, Islamophobia and other forms of discrimination experienced by immigrant and refugee communities, participants confirmed that it would be very difficult to engage communities and, in particular, men in family violence prevention programs.
Community engagement: Working with men

The majority of key informants noted that engagement of immigrant and refugee men in the prevention of and response to family violence was an urgent priority. Key informants discussed engaging with men primarily through community legal education to address misunderstandings about family violence and the law, or through men’s behaviour change programs, rather than prevention-specific initiatives that addressed gender inequality within communities. It was noted that immigrant and refugee men were reluctant to engage with family violence-related services until they had been charged with an offence. As a result, it was difficult to engage men in early intervention or prevention programs.

I think they won’t engage prior to [police intervention], unfortunately. That’s a really cynical, horrible thing to say but, often at that stage, once they’re potentially in trouble, it’s probably the best time to try and link them in with services. (Law and justice service provider, Victoria)

Some key informants described a need for community legal education initiatives to increase men’s awareness of Australian laws about family violence, particularly for men from countries where gender roles normalised men’s dominance in the family setting, and family violence is seen as a private matter with little or no legal redress. Attending to men’s understanding of family violence in the Australian legal context was seen to be important, and its neglect to have serious implications at the early intervention end of the family violence response. Key informants were concerned about men’s poor understanding of Australian family violence laws being compounded when interpreters were not used appropriately in the justice system to inform men about their responsibilities.

The police are being called, they’re [perpetrator] being kicked out of the house, they’re given a piece of paper by the police, they have no idea what’s going on, other than “you can’t go home and you can’t see your kids” and then they’re going to see the kids…and they’re bumping into the other partner in the supermarket and saying things, and then they’re getting charged with criminal offences and, you know, then they’re potentially being deported…So it’s quite serious and they’re not necessarily given an interpreter to understand what this order is. (Law and justice service provider, Victoria)

Many key informants felt that men’s behaviour change programs needed to be developed to provide education to immigrant and refugee men who perpetrate family violence to address their behaviour and belief systems. Currently, such programs rarely contain appropriate content for immigrant and refugee men. There were no language or ethno-specific men’s groups described in Tasmanian interviews, and very few in Victoria. Those that did exist had long waiting lists.

He [men’s behaviour change program coordinator] was at the court as well, so we’d actually shove the men straight into him, get them booked in if we could. Sometimes the list were out to 6 months. It was ridiculous. We couldn’t get them in. (Law and justice service provider, Victoria. It should be noted that, because of funding constraints, the program referred to in this quote no longer exists.)

Some key informants explained that the content of “mainstream” men’s behaviour change programs may not be appropriate for men from immigrant and refugee communities, as they are rarely grounded in the context of their life experiences and do not acknowledge the impact of racism and exclusion on many men’s lives. Key informants and women that we interviewed observed that these factors do not excuse men’s choices to use violence, but that they needed to be acknowledged for prevention and early intervention programs to have relevance in their lives and to be effective in addressing violent behaviours.

I’d never refer an African man to a men’s behavioural change course because they’re not going to provide an interpreter. He’s going to be in a room with people who don’t look familiar to him and they’re going to be talking about things that don’t even start to deal with where he’s coming from. (Law and justice service provider, Victoria)

The methodologies used in the groups may not make sense to immigrant and refugee men, and many men do not have the support needed to meaningfully engage with the behaviour change group process.

It really wouldn’t fit in with the group work content, having an interpreter there because how does that man actually participate in the group process? (Family violence service provider, Victoria)

Many key informants noted that the particular experiences of refugee men should be accounted for in both interventions and in prevention approaches, with attention given to men’s experiences of complex pre-arrival trauma involving war, armed conflict, abuse and witnessing violence as children.

The victim is an injured person, a disempowered person; but I tell you what, the perpetrators are often equally as injured and traumatised and disempowered and then may be placed beyond the point of no return by being flung into a prison cell, and they’re like, what’s the point, you know? (Health service provider, Tasmania)

However, as noted by other researchers examining family violence in Australian refugee communities, women with refugee backgrounds who have similar histories of exposure to violence as refugee men are considerably less likely to act violently towards their partner and family than men (Rees & Pease, 2007).
points strongly to the role of gender norms and expectations in the enactment of violence.

A number of key informants highlighted that in addition to the limited prevention initiatives targeting immigrant and refugee men, there were few early intervention or response services available for immigrant and refugee men.

Then there should be more [housing and support services] available for [immigrant] men. I’ve had this year, five respondents kill themselves, all immigrants… A lot of it has predominantly been because they’ve had nowhere to go… He’s stuck in his car, probably lost his job, lost his kids, lost his wife… You wonder why he then goes and murders her or the child. Don’t get me wrong, I’m not condoning that either, but I’m just saying, from his perspective, she’s sitting in the house with the kids, all set up, everything’s rosy for her and what’s he got to live for? He doesn’t care anymore. They’re the ones that worry the hell out of me. (Law and justice service provider, Victoria)
Conclusion

The ASPIRE project aimed to increase understanding of the nature and dynamics of violence against immigrant and refugee women in different Australian contexts, with specific focus on the extent to which women’s geographic location and local community may impact on their experiences of violence, help-seeking and access to prevention and support services. In addition, the research aimed to explore opportunities to support community-led responses to family violence against immigrant and refugee women. In this section we summarise our findings, outlining the ASPIRE project’s contribution to the current state of knowledge on immigrant and refugee women’s experiences of family violence.

Limitations of the study

In discussing the findings of the ASPIRE project, it is important to note some of the limitations of this research. First, most of the women who participated in interviews were referred to ASPIRE by family violence, community health or settlement services. This was an effective mechanism for connecting with women who had experienced family violence, but means that the results may not reflect the experiences of immigrant women who have little or no connection with service providers while dealing with family violence, or of those who continue to live with (currently) violent partners. Our results also do not capture all forms of structural discrimination that some immigrant and refugee women may face, as we did not specifically seek to interview (for example) immigrant and refugee women with disabilities or who had experienced family violence while in a same-sex relationship.

Our interviews with key informants captured the perspectives of professionals working in a wide range of services that interact with immigrant and refugee women in relation to family violence. However the timelines of the project meant that we were unable to obtain the approvals necessary for research with police officers. The research generated considerable data about women’s and key informants’ experiences with police, which could usefully underpin future research with police about their efforts to ensure the safety of immigrant and refugee women experiencing family violence.

The interviews that we conducted with immigrant and refugee women who had experienced family violence included women who had come to Australia through the humanitarian, family and skilled streams of the Migration Programme; women on a range of temporary visas including partner, student and bridging visas; women seeking asylum in this country; and second generation migrants. Focus group discussions were also conducted with women and men who had come to Australia through a variety of channels, but the majority of focus group discussions (22 of the 28) were with people who were refugees. This may limit our understanding of the impact of migration and resettlement on the gender relations (for example) within families who migrate to Australia primarily for employment and economic opportunities.

Finally, this work was limited to two Australian states. The different policies, practices, service systems, communities and histories of immigration in other jurisdictions may limit what is generalisable beyond Victoria and Tasmania.
Summary of findings

Our research findings highlight that the experience of immigration and resettlement in Australia can put women at risk by establishing their dependence on perpetrators of family violence for residency, economic security and access to services. In addition, many women resettle in regional and outer suburban centres where the supports they need may not be available and service providers are often ill-equipped and under-resourced to respond to the complex needs of immigrant and refugee women.

The existing Australian evidence base includes in-depth information about the perspectives of particular cultural communities living in particular Australian settings (see, for example Ogunsiji et al., 2011; Pittaway et al., 2009; Zannettino, 2012), and includes a substantive focus on the specific family violence experiences of refugees (see, for example, Rees & Pease, 2007; Fisher, 2013). In contrast to much of this work, the ASPIRE project worked with women and communities who had migrated from a broad range of countries, and who had come through all streams of the permanent Migration Programme, as well as women on a range of temporary visas including women seeking asylum. We do not claim the degree of local depth achieved by earlier, specifically targeted studies, but our approach allowed us to identify elements of women’s experiences that were shared across diverse cultural backgrounds and socioeconomic positions. That is, the ASPIRE project clarified that there are structural and systemic factors that shape immigrant and refugee women’s experiences and put them at risk.

Some women’s ability to leave a violent partner or access family violence services was uncertain or limited because they held a temporary visa. Previous work has analysed the position of women experiencing family violence within Australian immigration policy (for example, Ghafoornia, 2011). However, few studies have documented the impact of visa status and immigration policy on immigrant women experiencing family violence in Australia from the perspective of the women themselves, or from the perspective of those trying to provide services to them. This is a key contribution of the ASPIRE project.

The family and community contexts in which women live can also increase risks to women, if norms entrench gender inequality and if women are dissuaded from leaving a violent partner because they may lose all connection with friends, relatives and cultural community. Many of the women interviewed described how turning to their families and communities for help with family violence produced mixed results. In some cases, women received the support they needed; in others, family and community members reinforced unequal gender relations within women’s relationships and family violence was overlooked or tolerated.

The experiences of family violence reported by women we interviewed were generally consistent with other national and international research conducted in this area (Erez et al., 2009; Ghafoornia, 2011; Rees & Pease, 2007). Although physical violence was frequently a feature of women’s experiences, financial violence and social isolation were perhaps even more common among those we interviewed. All accounts were characterised by controlling behaviours, which often involved perpetrators using women’s status as immigrants against them by increasing women’s isolation from familiar networks, threatening deportation and separation from children, and capitalising on women’s lack of familiarity with Australian law and systems.

None of the women interviewed had the opportunity to receive the Commonwealth Government’s recently launched Family Safety Pack (in August 2015). This pack is included as a link with all partner visa grant letters, and includes information about family violence, Australian law and rights available in 46 languages. This is a potentially valuable initiative; however, our research findings strongly suggest that women who arrive on partner, prospective marriage, student or skilled migrant visas still face significant barriers to knowing their rights and avenues of recourse, even when they have high English language proficiency. Many women interviewed described having minimal involvement in their visa application process, and several had no access to mail or email without the perpetrator’s supervision. While refugee women we spoke to had often received some level of information about family violence as part of the settlement process, responses from focus groups and women interviewed suggested that the information was poorly timed, difficult to find relevant, or lower on the list of priorities for newly arrived families than seeking secure accommodation, employment and fearing deportation if they attracted police attention. Women seeking asylum or on bridging visas faced particular barriers to information and were not entitled to the services needed to live separately from their violent partner.

The women we interviewed endured family violence for long periods of time (from 1-30 years) before accessing the family violence system or finding other ways to seek safety. This does not mean that women did not act to protect themselves and mitigate the impacts of violence on the lives of their children, during the time they were living with violent perpetrators. Rather, they developed strategies to resist and manage perpetrators’ behaviours, spent time building their resources and connections, and sought support from sympathetic family, friends, community members, workplaces, teachers and neighbours. However, immigrant and refugee women’s sometimes prolonged exposure to violence both speaks to the barriers they face in accessing help, and has implications for services providing them support to manage the long-term consequences of violence.

Many of the women interviewed experienced displacement on multiple occasions. This is an important finding of the research.
Immigrant and refugee women experienced displacement on migration, whether their relocation to Australia was consensual or forced, to advance economic opportunities or flee war. Women who experienced family violence were then often forced to leave their new homes and move from one place to the other, sometimes moving between family and friends’ homes, refuges and other temporary housing, before finding permanent housing in another place. Women spoke about moving from metropolitan to regional locations, and sometimes to a different state to escape the perpetrator. Each move disrupted women’s connection to place, to family and cultural community, to services, and to employment and other forms of participation in the community. Place (and displacement) shaped women’s access to family violence and other services, in particular because of the limited availability of specialist services for immigrant and refugee women in regional Victoria and in Tasmania.

Immigrant and refugee women’s access to family violence services was not straightforward and tended to be mediated by others in the local context—namely non–family violence services, neighbours, family, workplaces, community networks and friends. On their own or with assistance, women typically came into contact with the service system via police during times of crisis; however, the responses they received, in both Victoria and Tasmania, were inconsistent in terms of application of police family violence protocols and the attitudes of police members—some demonstrating care and excellence in their responses, and some demonstrating victim-blaming and discriminatory behaviours.

The communication barriers that many immigrant and refugee women faced when seeking help for family violence were compounded when services, police and courts did not appropriately utilise interpreters. In addition, examples of poor practice within the interpreting industry sometimes put women and their children at further risk and made it very difficult for services to offer appropriate support. Interpreters themselves reported being under-valued and inadequately supported to work in the family violence sector.

Women’s experiences of services and authorities within the family violence service system were varied and a range of problems were identified arising from, in a few instances, prejudice and discrimination, and in many instances, interactions with an overstretched system that cannot stretch further to meet the complex needs of immigrant and refugee women. Systems in both jurisdictions were under-resourced and key informants noted crucial services, such as legal advice for complex immigration matters, were lacking. Key informants described how the sometimes limited interaction between the family violence and multicultural or settlement sectors further undermined women’s access to support, and how federal immigration policy impacted on state-funded services supporting women with no access to income. Indeed, immigrant and refugee women’s experiences with the family violence system indicated that the system is not adequately responsive to their needs. Women reported feeling isolated, pressured and unsupported within the system, and found themselves living in unsuitable and precarious housing that contributed to their stresses and concerns.

Another important finding relates to the lack of workforce diversity in the family violence sector. Key informants noted that the family violence workforce is not representative of the local communities that it serves. While specific services, such as the InTouch Multicultural Centre against Family Violence, employ a critical mass of bilingual and bicultural workers, this is not the norm. The few services that specifically provide services to immigrant and refugee women, to this point, have been overstretched and under-resourced.

Many women involved in this project had never had the option of being supported by a bilingual or bicultural worker. Some women, particularly those who reported previous negative experiences within their ethnic communities, were tentative about disclosing to someone from their community, and expressed concerns about confidentiality and feeling judged. However, those women who had been provided with bilingual and bicultural support from a specialist family violence service highly valued being supported by a woman who shared their language and who had a good understanding of the immigrant experience. Our findings emphasise the importance of immigrant and refugee women having choices about the types of support that they receive, inclusive of but not limited to specialist bilingual and bicultural services.

Our analysis also highlights that women have regular contact with a range of services outside of the family violence system, such as settlement and migration services, clinical and community health services, schools and English language programs, and that these have an important role to play in providing pathways for immigrant and refugee women into family violence services.

Women and key informants identified that inclusive referral pathways, collaborative case work and the co-location of a range of relevant services could facilitate immigrant women’s access to support for family violence, with some promising practices identified in the research sites. The Support and Safety Hubs proposed by the Victorian Royal Commission into Family Violence are promising in this regard, but must centralise the needs of immigrant and refugee women by ensuring that the migration, settlement, multicultural and interpreting sectors are involved in their development and implementation.

Evidence about the efficacy of current community engagement and primary prevention initiatives focused on immigrant and refugee communities is limited. It is important to note that few
of the women interviewed or focus group participants were aware of family violence prevention initiatives. Future efforts to prevent family violence against immigrant and refugee women, including community-led initiatives, must consider how the dynamic, complex and intersecting contexts of women’s lives shape relations of power between men and women striving to build lives in a new country.

The research team encountered a number of individuals and groups of immigrant women providing grassroots, voluntary family violence support to women in their local communities in both Victoria and Tasmania. These women were unfunded and remained outside the formal family violence sector, yet provided other immigrant and refugee women cultural and linguistic understanding that was lacking in the formal sector. These volunteers, who share the lived experience of migration and often the intersectional discrimination experienced by immigrant and refugee women facing family violence, are providing invaluable leadership in community settings. The knowledge of immigrant and refugee women who have directly experienced family violence, and the experience of those women supporting them, are vital resources for local policy-makers and practitioners seeking to improve family violence services, community engagement strategies and prevention programs.

The findings of the ASPIRE project give rise to a number of recommendations to policy-makers, practitioners and researchers, as outlined in the Executive Summary of this report. These recommendations arise from a synthesis of the experience and perspectives of immigrant and refugee women who have experienced family violence, women and men from diverse Victorian and Tasmanian communities, and those key informants working to provide services to them in constrained and complex circumstances. The urgency of their situation demands an equally urgent response.

Figure 14 “Out of the Shell” by Reeta Verma

This photograph was taken by me when I was passing the Royal Women’s Hospital for my meeting at the Red Cross. I was thinking:

“Your mind games, slurs, put-downs and insults made me a shell of a person. I was broken into two pieces—one which you think I am and the other which I think I am. I doubted my existence, questioned my worth and wondered my place in this world. Then one day I asked myself, ‘who am I?’ Out of the two shells emerged a strong, powerful and elegant woman. That is what I am.”
References


Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia.


Zannettino, L. (2012). “…There is No War Here; It is Only the Relationship That Makes Us Scared”: Factors Having an Impact on Domestic Violence in Liberian Refugee Communities in South Australia. *Violence Against Women, 18*(7), 807-828.

Appendix A: Acknowledgement of individuals and organisations

The ASPIRE research team would like to first and foremost express our gratitude and respect to everyone who participated in interviews, focus groups and Photovoice for the ASPIRE project. This research is a direct result of your generosity and willingness to share your experiences with us and we are very thankful for your support. We particularly acknowledge the strength of all the immigrant and refugee women who shared difficult and painful as well as funny and hopeful experiences with us.

This project was funded by ANROWS. In addition to being very grateful for this, we would like to thank those ANROWS team members whom we have worked closely with over the last 2 years, in particular Peta Cox, Trishima Mitra-Khan, Huette Lam and Mayet Costello.

We would like to thank the Bicultural Health Educators at the Multicultural Centre for Women’s Health and the Australian Red Cross Tasmania who helped us shape this research project with great care for women’s safety and cultural sensitivity. Thank you to Christina, Gagandeep, Ghezal, Malou, Manasi, Marianna, Uma M., Wafa, Yen, Dai, Tsige, Najibeh, Paw Htoo, Grace, Khadga, Oma, and Sayed. Many thanks also to Xavier Lane-Mullins and Marana Rangataua at the Australian Red Cross Tasmania, Yabbo Thompson at the Migrant Resource Centre Southern Tasmania, and Rose Byrnes, Naïme Cevik and Roshan Bhandary at InTouch Multicultural Centre against Family Violence for your support with coordinating research activities and training days.

Thank you to the Advisory Group in Victoria, including representatives from Domestic Violence Victoria, InTouch Multicultural Centre against Family Violence, Muslim Women’s Centre for Human Rights, cohealth, Foundation House, Gippsland Women’s Health, Loddon Mallee Women’s Health, Women’s Health in the North, Women’s Health in the South East, Integrated Family Violence Partnership Southern Melbourne, Loddon Campaspe Family Violence Advisory Committee, Gippsland Family Violence Integrated Regional Steering Committee, City of Greater Dandenong, and the Victorian Office of Multicultural Affairs (Department of Premier and Cabinet).

Thank you also to the Advisory Group in Tasmania, including representatives from Migrant Resource Centre Southern Tasmania, Migrant Resource Centre Northern Tasmania, Australian Red Cross Tasmania, Northern Tasmania Refugee Health Clinic, Hobart Women’s Shelter, Sexual Assault Support Service Tasmania, the University of Tasmania (Public Health and Global Health and the Institute for the Study of Social Change), Tasmania Police, Tasmanian Department of Justice (Safe at Home), Family Violence Counselling and Support Service, and the Royal Hobart Hospital.

In addition, we are very grateful for the work and dedication of Masters of Public Health students at the University of Melbourne who assisted us with critical aspects of this project. Thank you to Daniela Alvarado Rodriguez, Samantha Mannix, Jenna Chia, and Amanda Thompson.

Finally, we would like to thank all the service providers and community members who helped us bring focus groups together across the research sites and helped us connect with women for interviews. Your commitment and dedication to supporting immigrant and refugee communities, and, in particular, assisting women as they surmount incredible obstacles towards safety and wellbeing is truly remarkable. We hope this research will benefit your work into the future.
## Appendix B: Coding frameworks

### Coding framework for interviews with women

<table>
<thead>
<tr>
<th>Organising Themes</th>
<th>Basic Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Experiences of family violence</strong></td>
<td><strong>Behaviours and types of violence used by perpetrator(s)</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Commencement of violence in relationship(s)</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Comments about leaving or removing perpetrator(s)</strong></td>
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<tr>
<td></td>
<td><strong>Comments about staying with perpetrator(s)</strong></td>
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<tr>
<td></td>
<td><strong>Construction of relationship with perpetrator(s)</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Health and wellbeing consequences of violence</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Issues related to children and pregnancies</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Length of time enduring violence</strong></td>
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<tr>
<td></td>
<td><strong>Post-separation issues</strong></td>
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<td></td>
<td><strong>Responses or resistance to family violence</strong></td>
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<tr>
<td><strong>Experiences with service systems</strong></td>
<td><strong>Child protection</strong></td>
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<tr>
<td></td>
<td><strong>Family violence services and refuges</strong></td>
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<tr>
<td></td>
<td><strong>Housing (public, private, not refuge)</strong></td>
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<tr>
<td></td>
<td><strong>Immigration system</strong></td>
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<td></td>
<td><strong>Interpreters</strong></td>
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<td></td>
<td><strong>Justice, police, legal system</strong></td>
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<td></td>
<td><strong>Migration and settlement services</strong></td>
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<td></td>
<td><strong>Centrelink</strong></td>
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<td></td>
<td><strong>Health services</strong></td>
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<td></td>
<td><strong>Other services</strong></td>
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<tr>
<td></td>
<td><strong>Referral pathways to services</strong></td>
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<tr>
<td></td>
<td><strong>Views about service or systemic improvement</strong></td>
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<tr>
<td><strong>Help-seeking</strong></td>
<td><strong>Awareness of services or rights</strong></td>
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<tr>
<td></td>
<td><strong>Help-seeking beliefs or concerns</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Help for perpetrators</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Utilising informal supports (family, friends, neighbours)</strong></td>
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<tr>
<td><strong>Issues specific to place</strong></td>
<td><strong>Bendigo</strong></td>
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<td><strong>Brimbank</strong></td>
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<td><strong>Dandenong</strong></td>
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<td><strong>Hobart and Glenorchy</strong></td>
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<td><strong>Inner North-West</strong></td>
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<td><strong>La Trobe City</strong></td>
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<td></td>
<td><strong>Launceston</strong></td>
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<td></td>
<td><strong>Other places</strong></td>
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<tr>
<td></td>
<td><strong>Comparisons between places</strong></td>
</tr>
<tr>
<td><strong>Migration and settlement experiences</strong></td>
<td><strong>Pre-arrival experiences</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Places of settlement (initial and subsequent)</strong></td>
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</tbody>
</table>
### Organising Themes

<table>
<thead>
<tr>
<th>Basic Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reasons for coming to Australia</td>
</tr>
<tr>
<td>Types of visas</td>
</tr>
<tr>
<td>Views about migration and place(s) of settlement</td>
</tr>
<tr>
<td>Views about returning to home country</td>
</tr>
<tr>
<td>Work, study, financial issues</td>
</tr>
<tr>
<td>Communication issues</td>
</tr>
</tbody>
</table>

### Views on family relationships and family violence

<table>
<thead>
<tr>
<th>Basic Themes</th>
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</thead>
<tbody>
<tr>
<td>In relation to culture or religion</td>
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<tr>
<td>In relation to family or community attitudes</td>
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<tr>
<td>In relation to gender roles</td>
</tr>
<tr>
<td>In relation to what constitutes healthy relationships</td>
</tr>
<tr>
<td>Opinions about or understanding of family violence</td>
</tr>
</tbody>
</table>

### Coding framework for key informant interviews

<table>
<thead>
<tr>
<th>Organising Themes</th>
<th>Basic Themes</th>
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<tbody>
<tr>
<td>Assessments of women accessing services</td>
<td>Types of services provided by agency</td>
</tr>
<tr>
<td></td>
<td>Descriptions of women’s referral pathways</td>
</tr>
<tr>
<td></td>
<td>Awareness of women’s visa types</td>
</tr>
<tr>
<td></td>
<td>Assessment of women's experiences of violence</td>
</tr>
<tr>
<td></td>
<td>Observations about impacts of culture or religion</td>
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<tr>
<td></td>
<td>Observations about impacts of gender roles</td>
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<tr>
<td></td>
<td>Observations about isolation</td>
</tr>
<tr>
<td></td>
<td>Observations of women’s concerns about family or community attitudes</td>
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<tr>
<td></td>
<td>Observations of women’s response/resistance to violence</td>
</tr>
<tr>
<td></td>
<td>Observations about women’s understanding of violence</td>
</tr>
<tr>
<td></td>
<td>Observations of women’s awareness of services or rights</td>
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<tr>
<td></td>
<td>Observations of women’s concerns about accessing services/authorities</td>
</tr>
<tr>
<td></td>
<td>Observations of women’s success stories after violence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Barriers to effective service provision</th>
<th>Basic Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding and sustainability barriers</td>
<td></td>
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<tr>
<td>High demand for services</td>
<td></td>
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<tr>
<td>Resource intensity</td>
<td></td>
</tr>
<tr>
<td>Housing barriers</td>
<td></td>
</tr>
<tr>
<td>Family violence services and refuge barriers</td>
<td></td>
</tr>
<tr>
<td>Immigration system barriers</td>
<td></td>
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<tr>
<td>Settlement service barriers</td>
<td></td>
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<tr>
<td>Justice, police and legal system barriers</td>
<td></td>
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<tr>
<td>Child protection barriers</td>
<td></td>
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<tr>
<td>Knowledge/capacity problems responding to family violence</td>
<td></td>
</tr>
<tr>
<td>Regional geographic barriers</td>
<td></td>
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<tr>
<td>Language, communication barriers</td>
<td></td>
</tr>
<tr>
<td>Problems with communication or collaboration between services</td>
<td></td>
</tr>
<tr>
<td>Racism, discrimination, anti-immigration issues</td>
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</tbody>
</table>
### Organising Themes

<table>
<thead>
<tr>
<th>Basic Themes</th>
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</thead>
<tbody>
<tr>
<td>Facilitators for effective service provision</td>
</tr>
<tr>
<td>Co-location or collaboration between services</td>
</tr>
<tr>
<td>Effective knowledge and capacity responding to family violence</td>
</tr>
<tr>
<td>Helpful policies or regulations</td>
</tr>
<tr>
<td>Training provision or needs</td>
</tr>
<tr>
<td>Trust and rapport</td>
</tr>
<tr>
<td>Useful service provision or advocacy strategies</td>
</tr>
<tr>
<td>Descriptions of migrant/refugee issues</td>
</tr>
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<td>Problems or gaps providing services to migrants/refugees</td>
</tr>
<tr>
<td>Practices or strategies providing services to migrants/refugees</td>
</tr>
<tr>
<td>Perceptions about migrants/refugees</td>
</tr>
<tr>
<td>Bicultural, bilingual workers</td>
</tr>
<tr>
<td>Experiences with interpreters</td>
</tr>
<tr>
<td>Creative policies and practices with interpreters</td>
</tr>
<tr>
<td>Interpreting industry issues (including gender)</td>
</tr>
<tr>
<td>Negative experiences</td>
</tr>
<tr>
<td>Positive experiences</td>
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<tr>
<td>Issues specific to place</td>
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<tr>
<td>Bendigo</td>
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<td>Brimbank</td>
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<td>Dandenong</td>
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<td>Hobart and Glenorchy</td>
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<td>Inner North-West</td>
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<td>La Trobe City</td>
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<tr>
<td>Launceston</td>
</tr>
<tr>
<td>Other places</td>
</tr>
<tr>
<td>Prevention strategies and community engagement</td>
</tr>
<tr>
<td>Code under organising theme</td>
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<tr>
<td>Responses for perpetrators</td>
</tr>
<tr>
<td>Code under organising theme</td>
</tr>
<tr>
<td>Worker sustainability issues (burnout, stress, values)</td>
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<td>Code under organising theme</td>
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### Coding framework for women’s focus group discussions

<table>
<thead>
<tr>
<th>Organising Theme</th>
<th>Basic Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness of family violence/gender equality</td>
<td>Awareness of types of family violence</td>
</tr>
<tr>
<td></td>
<td>Awareness family violence against the law</td>
</tr>
<tr>
<td></td>
<td>Lack of awareness of where to seek help for family violence</td>
</tr>
<tr>
<td></td>
<td>Awareness of gender equality</td>
</tr>
<tr>
<td></td>
<td>Australia not gender-equal society</td>
</tr>
<tr>
<td></td>
<td>Gender equality improving in home country</td>
</tr>
<tr>
<td></td>
<td>Men and boys need education about gender equality</td>
</tr>
<tr>
<td>Communication/language</td>
<td>Difficulty accessing services due to language barriers</td>
</tr>
<tr>
<td></td>
<td>Challenges obtaining citizenship due to language barriers</td>
</tr>
<tr>
<td></td>
<td>Concerns about interpreter confidentiality</td>
</tr>
<tr>
<td></td>
<td>Reliance on family members/children to interpret</td>
</tr>
<tr>
<td></td>
<td>Challenges learning English (accessing programs, trauma/stress)</td>
</tr>
</tbody>
</table>
## Coding framework for men's focus group discussions

<table>
<thead>
<tr>
<th>Organising Theme</th>
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</thead>
<tbody>
<tr>
<td><strong>Employment barriers</strong></td>
<td>Expectations of Australian qualifications/experiences</td>
</tr>
<tr>
<td></td>
<td>Racism/discrimination barriers to employment</td>
</tr>
<tr>
<td></td>
<td>Lack of employment opportunities in regional areas/Tasmania</td>
</tr>
<tr>
<td><strong>Immigration</strong></td>
<td>Impact of visa categories on family relationships</td>
</tr>
<tr>
<td></td>
<td>Confusion re: visa restrictions/requirements</td>
</tr>
<tr>
<td></td>
<td>Concerns re: family reunification (people left behind)</td>
</tr>
<tr>
<td>Organising Theme</td>
<td>Basic Theme</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Causes of family violence</td>
<td>Unemployment causes family violence</td>
</tr>
<tr>
<td></td>
<td>Mental health concerns and stress causes family violence</td>
</tr>
<tr>
<td></td>
<td>Women/girls rebel after migration causes family violence</td>
</tr>
<tr>
<td></td>
<td>Men not adjusting to gender equality causes family violence</td>
</tr>
<tr>
<td>Solutions to family violence</td>
<td>Prioritise resolving within families</td>
</tr>
<tr>
<td></td>
<td>Seek help from elders, parents, friends</td>
</tr>
<tr>
<td></td>
<td>Increase employment opportunities for men</td>
</tr>
<tr>
<td></td>
<td>Strengthen community unity</td>
</tr>
<tr>
<td></td>
<td>Allow traditional parental authority over children</td>
</tr>
<tr>
<td>Services/authorities</td>
<td>Concerns about police (racism and lack of cultural awareness)</td>
</tr>
<tr>
<td></td>
<td>Concerns about police/child protection breaking up families</td>
</tr>
<tr>
<td></td>
<td>Concerns that police make family violence worse</td>
</tr>
<tr>
<td></td>
<td>Concerns about Centrelink giving money to women/children</td>
</tr>
<tr>
<td></td>
<td>Concerns legal/justice system punitive, not solution oriented</td>
</tr>
<tr>
<td>Culture/community</td>
<td>Communal societies vs. Western individualist societies</td>
</tr>
<tr>
<td></td>
<td>Acculturation of children/youth to Western norms</td>
</tr>
<tr>
<td></td>
<td>Dowry/financial duties in marriage</td>
</tr>
<tr>
<td>Family relationships</td>
<td>Role of men in families</td>
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<tr>
<td></td>
<td>Role of women in families</td>
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<tr>
<td></td>
<td>Changing gender roles/responsibilities</td>
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<tr>
<td></td>
<td>Parenting challenges post-settlement</td>
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<tr>
<td>Place</td>
<td>Problems with housing affordability in urban areas</td>
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<tr>
<td></td>
<td>Living in regional vs. urban locations</td>
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<tr>
<td></td>
<td>Positive views on place of settlement</td>
</tr>
<tr>
<td></td>
<td>Negative views on place of settlement</td>
</tr>
<tr>
<td></td>
<td>Religious/cultural needs not met in regional areas</td>
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</table>