

# Victorian 2025-26 Pre-Budget Submission

*Securing a best-practice broad suite of effective interventions for people using violence*



## Acknowledgement of country

No to Violence acknowledges First Nations Peoples across these lands; the Traditional Custodians of the lands and waters. We pay respect to all Elders, past, present and emerging. We acknowledge a deep connection with country which has existed over 60,000 years. We acknowledge that sovereignty was never ceded, and this was and always will be First Nation's land.

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## About No to Violence

No to Violence (NTV) is the Victorian peak body for organisations and individuals working with people using violence to end family violence. We provide support and advocacy for this work, which includes but is not limited to, Men's Behaviour Change Programs, case management, individual counselling, policy development and advocacy, workforce development, and research and evaluation.

NTV delivers a range of frontline services, including the Men's Referral Service, Brief Intervention Service, Men's Accommodation and Counselling Service, and the Family Advocacy and Support Service. We also provide a range of training for the specialist family violence workforce, including a Graduate Certificate in partnership with Swinburne University, as well as professional development for workforces who engage with people using violence. NTV is a leading national voice and plays a central role in the development of evidence, policy and advocacy to support the work to end people's use of family violence.

As a pro-feminist organisation, the safety and dignity of victim-survivors is at the centre of everything we do. It is by ending people's use of violence that families can have happier, safer and more fulfilled lives.

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# Table of Contents

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Executive summary ..... 4

Priority 1: Resourcing to ensure existing interventions can operate at best-practice standards ..... 6

Priority 2: Sustainable, longer-term funding ..... 7

Priority 3: Funding a broader suite of interventions for people using family violence..... 9

Priority 4: New contractual obligations need to focus on outcome, not output measures ..... 12

Priority 5: Investment in improved information sharing..... 13

Key recommendations..... 15

## Executive summary

No to Violence (NTV) is the Victorian peak body for organisations and practitioners working with people using family violence. This submission highlights the key priorities for organisations working with people using family violence ahead of the 2025-26 Victorian state budget. **No to Violence recommends the Victorian Government develop a state-based strategy to coordinate responses to people using violence, to sit within key family violence policy architecture.**

Service providers working with people using violence collectively identified 5 key priority areas for the 2025-26 Budget:

### 1. 81% emphasised the need for more resourcing to ensure existing interventions operate at best-practice standards, including identified funding for family safety contact work

Without dedicated funding for family safety contact work, post-program participation and intake and assessment, these aspects of working with people using violence risk being devalued. **75% of members surveyed said that a lack of identified funding for core components of their work is a significant barrier to meeting demand.**

Identified funding for family safety contact work has been missed in recent funding announcements, impacting on how many people using violence service providers are able to safely deliver services to at any given time.

Our member survey showed an average of **44 people per provider were on waitlists for services. 1 in 4 organisations had more than 100 people waiting on waitlists. 77% had at least one program with a waitlist of 4 weeks or more. These waitlists put victim-survivors at risk if people using violence disengage from help seeking.**

### 2. More than two-thirds of service providers want sustainable, long-term funding

Innovative programs and projects need time to embed learnings and continuously improve. Moving away from one-off, short-term funding allows the wisdom these programs generate to be retained within organisations and shared with other family violence organisations and allied sectors.

### 3. Almost two-thirds of members surveyed are calling for funding to enable a broader suite of interventions for people using family violence

High levels of demand are not wholly due to a lack of places in programs. A lack of funding for an appropriate range of service modalities, including access to allied services, constrains delivery of the *right* intervention to the *right* person at the *right* time.

To meet demand there needs to be increased investment in:

- Therapeutic one-to-one counselling and other trauma responsive modalities
- First Nations-led and healing-focused programs
- Holistic and whole-of-family approaches
- Targeted programs for marginalised people and communities, including people from LGBTIQ+ and culturally and racially marginalised communities
- Targeted programs for people with complex factors that overlap with their use of violence, such as cognitive impairment, childhood experiences of trauma, and high-harm, high-risk men

- Residential-based interventions
- Embedded interventions, including those co-located with police and other key systems
- Multi-agency and cross-sectoral collaborative approaches, including across substance misuse, mental health and other allied sector approaches

#### 4. More than half of service providers surveyed want contractual obligations to shift from measuring outputs to outcomes

Current funding agreements skew resources towards servicing more people using family violence (prioritising outputs like attendance and completion rates) rather than focussing on outcomes (such as facilitating behaviour change and taking accountability, building help seeking capabilities, attitude change, and ensuring the safety and wellbeing of affected family members).

#### 5. More than half of members surveyed called for investment in improved information sharing, particularly within The Orange Door (TOD) network and Central Information Point (CIP)

There are major pain points within the existing system that are impacting on the quality and timeliness of responses to people using family violence. **Almost half of service providers surveyed independently identified significant issues with TOD responses, including restricted access to the CIP.**

**Addressing these five priority areas is crucial to ensure organisations working with people using family violence is able to respond to emerging challenges, and continuously improve.**

Without reform, existing issues will become further entrenched; more opportunities to engage people using family violence at key assessment and referral points will be lost; and services will be forced to turn away increasing numbers of people using family violence seeking support to change their behaviour. This means leaving more victim-survivors at risk.

Service providers have outlined a clear roadmap for a stronger and more responsive family violence service system. They want it to advance transformative ways to end family violence, work with government to deliver best-practice interventions, and support to continuously improve and innovate. NTV looks forward to working with the Victorian Government to strengthen existing responses and laying the foundations for innovative, new ways of working into the future.

## Priority 1: Resourcing to ensure existing interventions can operate at best-practice standards

Better resourcing to offer best-practice interventions was the overwhelming priority for service providers; with more than 80 percent highlighting the need for funding boosts.

Current available modalities for people using family violence need to be supported to work effectively, including adequate funding of core components of each intervention.

Victoria's interventions for people using family violence centre the Men's Behaviour Change Program (MBCP) model.<sup>1</sup>

Greater funding certainty for the people using violence sector, as outlined in details of the Women's Safety Package (WSP), is welcome news for the sector working with people using violence.<sup>2</sup>

Particular points of interest for the sector working with people using violence include:

1. Boosts to case management funding levels to enable a greater therapeutic focus.
2. Further details on whether brokerage funding will be retained at 2023 levels across **all interventions** are not outlined in the WSP. These details are crucial for service providers.
3. NTV was glad too to see funding announcements focus on recovery efforts for children and young people. We **await more details on whether these therapeutic interventions will complement or replace existing adolescent violence in the home programs**, funded in the 2021-22 and 2023-24 budgets and due to lapse in 2024-25 unless funding is renewed.
4. The continuation of post-MBCP participation services are also welcome.

However, critical components of existing work are missing from the WSP. We await further details about the security of existing work. For example, referral services, intake and assessment and family safety contact work are critical central parts of service provision. These components of the work do not always receive identified funding.

Identified funding for specific program offerings serves as a mandate for organisations to direct limited resources to certain service modalities. For example, post-Men's Behaviour Change Program support and Family Safety Contact work are not framed within current Department of Families, Fairness and Housing contract targets. This places these service modalities lower in a scale of increasingly competing priorities as under-funded organisations struggle to keep pace with the scale of demand.

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### *Available modalities in Victoria include:*

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- Men's Behaviour Change Programs;
- Men's case management;
- Accommodation-based perpetrator interventions;
- Community programs for Aboriginal people;
- Diverse cohort community programs;
- Fathering interventions;
- Managing serious risk;
- Post-participation services;
- Programs for adolescents and young persons who use family violence.<sup>1</sup>

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<sup>1</sup> In other states, other modalities formed the basis of interventions, such as long-term residential accommodation-based interventions in Western Australia or invitational and narrative therapy approaches in South Australia.

<sup>2</sup> September 2024 meeting of the Family violence Reform Advisory Group.

Within existing modalities there is need to update Men’s Behaviour Change program content in response to changing legislative and policy reform contexts. Overwhelmingly, service providers identified sexual assault and technology-facilitated abuse as priority areas where content needs to be updated.

Work is currently underway to create resources on technology-facilitated abuse in partnership with NTV, the Monash Gender and Family Violence Prevention Centre and the e-Safety commission to support best-practice.

Similar work is necessary in response to legal changes – introducing an affirmative consent model and non-fatal strangulation offences. **SASVic and No to Violence want to improve the sexual violence content delivered within MBCPs. We are seeking support from the Victorian government to address this key priority area through collaboration on improved program content that can be rolled out across the state.**

**The Outcomes Practice Evidence Network (OPEN) project is also in need of expansion to embed key learnings across the sector.** No to Violence wants to see the intention of this project realised through ongoing investment so that OPEN supports practitioner learnings for years to come.

## Priority 2: Sustainable, longer-term funding

Longer and more secure contract terms have potential to transform what is possible for the family violence sector. At present, **three quarters of service providers (75%) indicated they are yet to transition to long-term service contract terms.**

Innovative programs and projects need time to embed learnings and continuously improve. Moving away from one-off, insecure and short-term strategies allows the wisdom these programs generate to be retained within organisations and shared with other family violence organisations and allied sectors.

Alarming, funding for specialist services for marginalised people and communities is among the most insecure. Some service providers funded through diverse cohort trials are now in their seventh year of insecure year-to-year contracts. An evaluation conducted by Deloitte argued these programs should be funded permanently, yet no arrangements have been made.<sup>3</sup> **NTV advocates for a shift towards funding models that enable community-led organisations working with and for marginalised people to thrive.**<sup>4</sup>

Approaches to working with marginalised people and communities improve the overall quality of service provision for everyone. The interplay of family violence and structural violence creates a series of complex challenges for victim-survivors and necessitates more in-depth work with people using violence.<sup>5</sup> Punitive approaches are not appropriate when communities have experienced intergenerational trauma linked to legacies of harm caused by government systems and services.<sup>6</sup>

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<sup>3</sup> See Deloitte’s 2021 [evaluation of the diverse cohort trials](#).

<sup>4</sup> The broader community services sector has indicated support for this change, as outlined in a [recent consultation process led by the federal Community Sector Advisory Group](#).

<sup>5</sup> Carlson et al. (2024) [What works? A qualitative exploration of Aboriginal and Torres Strait Islander healing programs that respond to family violence](#).

<sup>6</sup> See for example [Victorian Aboriginal Legal Service’s statements](#) made to the Yoorrook Commission.

Service providers who address multiple overlapping challenges are using skillsets and building knowledge the wider family violence sector and allied sectors can greatly benefit from.

However, insecure and short-term contracts create a churn of staff, interrupting the flow of crucial practice knowledge.<sup>7</sup> Specialist practitioners deserve secure and ongoing employment and safe working conditions. Efforts to move towards safe working environments that support wellbeing can only go so far when staff are not able to access ongoing and secure employment conditions. High staff turnover negatively impacts on organisations, including impacting succession planning and resources due to the cost of replacing staff. This also stymies potential for innovation as expertise exits organisations.

We understand some work is underway to address workforce issues and improve the availability of services for marginalised people and communities, as outlined in the Women’s Safety Package and *‘Framing the future: The second rolling action plan 2023-2026’* under *‘Building from strength: 10-year industry plan for family violence prevention and response’*.<sup>8</sup> The views of service providers working with and for marginalised communities should be prioritised by government in determining how to best implement these reforms and determine next steps.

#### *Member insight*

“Often contracts are renewed very late in the piece, causing significant disruption in that you cannot offer security to staff which means that they look for more secure employment. This is magnified in the current cost of living crisis where people require greater security to meet the ever increasing costs of basic life necessities.”

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<sup>7</sup> Similar findings were reflected in Deloitte’s 2021 [evaluation of the diverse cohort trials](#).

<sup>8</sup> Responses are consistent with similar findings outlined in Family Violence Reform Implementation Monitor (2023) [Monitoring Victoria’s Family Violence Reforms: Service response for perpetrators and people using violence within the family](#).



## Priority 3: Funding a broader suite of interventions for people using family violence

Practitioners have a deep understanding of the broader service environment and the policy context. They have an acute awareness of how it often constrains the work they are and would like to be doing. As the peak body for practitioners and organisations working with people using family violence sector, No to Violence is advocating for Government to ensure there is a targeted, effective and available suite of interventions to best ensure behaviour change.

Men's Behaviour Change Programs are an important part of a suite of interventions for working with men who use family violence – however, they are not a one-stop-shop for every person using violence. People using violence live complex lives, so, to end violence, there needs to be a complex service system response to address multiple overlapping issues. **We need a broader suite of interventions working across prevention, early intervention, response, recovery and healing.**

We urgently need diverse and multi-pronged approaches for engaging people using violence across different age groups, cultural backgrounds, sexualities, and those with multiple and complex needs, as well as those who are marginalised. This is especially those experiencing multiple and overlapping forms of structural discrimination e.g. racism, classism, ableism, homophobia, and transphobia.

Practitioners are best placed to identify the right intervention for the right person at the right time. A lack of appropriate and available services impacts on how many people using violence service providers can safely deliver a service at any given time. **In turn, demand for services is not able to be met.**

- **75% of members surveyed identified funding terms as a significant barrier to meeting demand, constraining service delivery.**

**Our member survey showed an average of 44 people per provider were on waitlists for services in August 2024. 1 in 4 organisations had more than 100 people waiting on waitlists. 77% had at least one program with a waitlist of 4 weeks or more.**

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### *To meet demand there needs to be increased investment in:*

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- Therapeutic one-to-one counselling and other trauma responsive modalities
  - First Nations-led and healing-focused programs
  - Holistic and whole-of-family approaches
  - Targeted programs for marginalised people and communities, including people from LGBTIQ+ and culturally and racially marginalised communities
  - Targeted programs for people with complex factors that overlap with their use of violence, such as cognitive impairment, childhood experiences of trauma, and high-harm, high-risk men
  - Residential-based interventions
  - Embedded interventions, including those co-located with police and other key systems
  - Multi-agency and cross-sectoral collaborative approaches, including across substance misuse, mental health and other allied sector approaches
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Demand constraints persisted despite more than three quarters of service providers agreeing that they are able to meet contractual obligations most of the time.

**More than a third of service providers wanted to be able to offer an appropriate range of services so that they can respond to demand.**

These challenges are not insurmountable. Many people using violence have a range of urgent priorities that need to be addressed alongside their use of violence. Efforts to change violent behaviours does not occur in isolation from other life challenges, including financial and housing insecurity.<sup>9</sup> There is an acute need for more resources for program readiness to ensure people using violence are able to engage in behaviour change programmes. This includes increased investment in case management and brokerage to maximise the effectiveness of group-based interventions.

A thriving sector working with people using violence needs to be able to work flexibly across prevention, early intervention, response, and recovery and healing as needed, reflecting the diverse and non-linear change journeys of people using violence.<sup>10</sup>

There is an urgent need to develop more targeted supports, including for significant mental health issues, alcohol and other drug misuse, dis/ability, and language or cultural needs. These need to be embedded, long-term, into the service system. Addressing this requires innovative approaches and support from other specialist practitioners with skills in addressing these needs, especially those working in community-led responses and allied sectors.

People using violence may have their own experiences as victim-survivors of violence, including family violence and state violence.<sup>11</sup> For these people, it is

### *Barriers to meeting demand*

Almost half of service providers surveyed said that they are unable to adequately support Affected Family Members – this issue was linked to a lack of identified funding for family safety contact work, meaning that this work is de-prioritised or self-funded, pulling resources away from other key priorities.

Almost one third of service providers said there are not enough places available in their programs to respond to demand.

Almost one third of service providers said they are unable to offer an appropriate range of services that meet the needs of people seeking help.

Almost one third of service providers said they cannot recruit skilled workers.

A quarter of service providers said government decision makers did not listen to their needs and this posed a major challenge for them. Service providers report that they have proactively raised common challenges with government representatives

<sup>9</sup> Fitz-Gibbon et al. (2024) [Engaging in Change: A Victorian study of perpetrator program attrition and participant engagement in men's behaviour change programs.](#)

<sup>10</sup> There are also exciting opportunities to broaden available service modalities outlined in the WSP, making room for innovations that will shape the future – especially responses to people using violence who represent high levels of risk to victims, the community and themselves.

<sup>11</sup> This is an increasingly visible stream of critical research. See for example Fitz-Gibbon et al. (2022) [Adolescent Family Violence in Australia: A national study of prevalence, history of childhood victimisation and impacts](#) and Fitz-Gibbon (2018) [Investigating Adolescent Family Violence in Victoria: Understanding experiences and practitioner perspectives.](#)

essential to build relationships and trust to maximise the effectiveness of interventions – this process takes time.<sup>12</sup> For example, members who deliver services in prisons may need to simultaneously address a range of needs to support community reintegration alongside addressing the use of family violence. This is done without funding that recognises the multi-pronged nature of their work. These services are especially vital because in-prison specialist family violence services have not been running. **No to Violence advocates for externally ran specialist family violence services in prisons to mitigate some of these challenges.**

Tailored services that meet a range of overlapping needs hold important knowledge and skills. These are beneficial for mainstream service providers. Tailored program offerings often use a flexible and holistic approach that works well for everyone, including people experiencing barriers to engaging in Men’s Behaviour Change Programs. **Sustained investment in tailored program offerings holds potential for broadening service modalities as more is learned about improving engagement with a broader range of people using violence.**

#### *Member insight*

“It would be more helpful if government funded services in a way that did not provide a linear response. **In many instances, the first and sometime only choice of service is MBCP. This does not work for all people who use violence.** We would encourage an approach that is driven by the current needs of the people who use violence. This should include a greater level of engagement with mental health and AOD services”

Many other non-specialist family violence services and practitioners are also playing a key role to address family violence through the provision of allied services. **Almost half of service providers surveyed said a major barrier to meeting demand was a lack of resourcing for collaboration with allied services.** Practitioners want to address multiple complex and overlapping barriers so that people using violence are supported to change their behaviour. This is not possible within current resourcing.

Despite some important steps towards realising a broader suite of interventions, there are concerns current approaches to attempting to diversify the range of available tailored interventions have been insufficient. For example, mandatory counselling orders offered through Court Services Victoria, as part of family violence sentencing conditions have lapsed and its replacement includes some funding for targeted interventions for marginalised people and communities. However, there are serious concerns about the viability of the new funding arrangement, with some arguing quality tailored service delivery would be nearly impossible.

There is a national shift towards designing funding arrangements to cover the real cost of delivering services. Aligning program objectives with contractual terms would strengthen program mandates to facilitate accountability and create conditions for behaviour change – in turn enabling a shared understanding of what success looks like when working with people using violence.<sup>13</sup> Some of these challenges could be mitigated in the short-term by shifting towards more transparent funding outcomes, similar to the way New South Wales makes who it funds to deliver MBCPs publicly available, thus there is clarity around how much the state is investing with what providers and on what

<sup>12</sup> Carlson et al. (2024) [What works? A qualitative exploration of Aboriginal and Torres Strait Islander healing programs that respond to family violence.](#)

<sup>13</sup> See for example the [recent consultation process led by the federal Community Sector Advisory Group.](#)

type of programmes.<sup>14</sup> No to Violence advocates for greater transparency of government data, including funding decisions. This is a crucial part of fulfilling the Victorian Government’s commitment to a ‘web of accountability’ to end family violence.

## Priority 4: New contractual obligations need to focus on outcome, not output measures

Service providers believe current funding agreements constrain service delivery options by skewing resources towards focussing on the number of people serviced, rather than victim-survivor safety and behaviour change outcomes. Providers want the Government to move away from measuring attendance and completion rates, to instead measure what success looks like when facilitating behaviour change. This includes building clients’ help seeking capabilities, attitude changes, and accountability, alongside ensuring improved safety and wellbeing of affected family members.

A focus on outcomes enables the sector to divert more people away from using violence.

### *Member insight*

“Individual and group readiness approaches need to be funded flexibly. This allows for us to engage with the man, keep him in view and still meet government contractual requirements. We undertake a lot of one-to-one work that aligns with the Perpetrator Case Management program requirements giving us the opportunity to continue to assess and manage risk and support men for whom group is not a good fit.”

Currently, interventions for people using violence funded through Department of Families, Fairness and Housing are required to report their performance against the following indicators:

- number of case management responses provided to persons using family violence
- number of men participating in a MBCP
- number of calls responded to by the statewide telephone helpline for men regarding family violence
- number of cases referred to Risk Assessment and Management Panels (RAMP) and managed by the coordinators
- number of cases referred to and assisted by a RAMP
- number of episodes of support provided to adolescents using violence in the home.<sup>15</sup>

We understand that this issue has been identified as a priority area for the Department of Families, Fairness and Housing and await further detail.

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<sup>14</sup> For example, New South Wales publishes funding outcomes. This register is [publicly available](#). National Cabinet have also discussed improving transparency of National Partnership Agreement funding decisions.

<sup>15</sup> Department of Families, Fairness and Housing (2024) Submission to the Inquiry into Capturing Data on Family Violence Perpetrators in Victoria.

Moving towards outcome measurements also enables specialist practitioners to use their expertise to enable best practice responses. To do this work, specialist practitioners need to be assured systems are responsive to the risk that they hold. All parts of government and service systems need to work effectively together to support accountability, as outlined in the ‘web of accountability’ that guides strategic planning.<sup>16</sup>

**By working with service providers to meaningfully measure the impact of service delivery, rather than number of services delivered, the Victorian Government and specialist family violence sector can build a deeper understanding of what works to stop people using violence.** Alignment of an outcomes framework with government contracts would enable deeper and more targeted understanding of the impacts of interventions.

## Priority 5: Investment in improved information sharing

There are major pain points within the existing system. Disconnections between TOD network and service providers are affecting the timeliness and accuracy of risk assessments. Almost half of the service providers **surveyed independently identified significant issues with TOD responses.**

People using violence service providers are concerned TODs are not effectively assessing and referring people using violence. This impacts the quality of engagement with people using violence and the number of people receiving a service. Providers are worried people using violence are not being identified when they present to TODs. They believe this is reflected in low referral numbers of people using violence to some services.<sup>17</sup>

In worst case scenarios, the lack of response to people using violence is implicated in family violence homicides and deaths by suicide of people using violence. **No to Violence has received reports of anecdotal evidence indicating rising numbers of suicidality and deaths by suicides of people using violence who are clients or prospective clients within TOD network.** This needs to be investigated urgently.

**There are also serious concerns TODs are not effectively responding to marginalised people,** impacting the numbers of people receiving services tailored to their needs. A case study from Thorne Harbour Health outlines the devastating impacts of status-quo responses to LGBTIQ+ people, where discriminatory assumptions render risk assessments ineffective.<sup>18</sup> Similar findings were echoed in Deloitte’s 2021 evaluation of diverse cohort trials.<sup>19</sup>

### *Member insight*

“In our experience, there are some issues with referrals from the Orange Door system into men’s services. There is some concern that the Orange Door system and its processes, doesn’t always allow for a high level of engagement with people who use violence. It would be helpful to undertake some greater exploration of this work and look for opportunities to intervene with people who use violence at this juncture”.

<sup>16</sup> Victorian Government [Family Violence Reform Rolling Action Plan 2020–2023](#).

<sup>17</sup> September 2024 meeting of the Family Violence Reform Advisory Group, based on July 2024 data.

<sup>18</sup> 2024 [Thorne Harbour Health and No to Violence case study](#).

<sup>19</sup> Deloitte (2021) [evaluation of the diverse cohort trials](#)

Some service providers report:

- TOD processes vary from hub-to-hub and sometimes include redactions of L17 police referrals. This suggests the need for more coordinated processes across TOD service system.
- Information sharing requests are filled weeks after risk assessments have been completed.

Lags in fulfilling information sharing requests impact the flow of intake and assessments. **There are concerns backlogs will only increase as federal and state-based primary and early intervention projects, e.g. Ballarat Saturation Model, increase awareness of family violence and subsequently boost demand.**

No to Violence has advocated with the Victorian Government about members' concerns, as well as members independently raising these issues with Family Safety Victoria, through TOD Practice Leads and Hub Managers.<sup>20</sup> Clear and consistent processes for information sharing will support referrals from TODs to service providers and allow clients timely access to services, intervention and provide greater family safety to victim survivors.

Expanding access to the CIP is crucial. However, this process requires thoughtful application to address the root causes of constrained information sharing.

Risks associated with expanding access to the CIP can be mitigated by:

- Providing training for specialist family violence service staff on how to use the CIP system and assess and manage related risk, such as when to disclose risk-related information to victim-survivors;
- Developing an accessible, effective, and responsive mechanism to rectify misidentification of the predominant aggressor across relevant data systems;
- Ensuring information gathered through CIP reports for the purpose of providing services to people using violence does not burden victim-survivors.

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<sup>20</sup> No to Violence (2024) submissions to the [Third Rolling Action Plan](#) and [Inquiry into Capturing Data on Family Violence Perpetrators](#).

# Key recommendations

Develop a state-based strategy to coordinate responses to people using violence to:

1. **Resource existing interventions to operate at best-practice standards**
  - Align best practice standards with key performance targets in service contracts
  - Provide identified funding for all core components of existing work, especially family safety contact work
  - Update program content in line with policy and legislative reforms
  - Expand the OPEN portal to maximise its reach
2. **Shift towards providing sustainable long-term funding as the default model**
  - Provide earlier notification of funding agreement decisions
  - Transition long-term pilot programs to long-term service contracts
  - Develop funding models to allow community-led services to thrive
  - Improve funding transparency to enable a move away from competitive tendering
3. **Make available a broader suite of interventions for people using violence**
  - Introduce program readiness to maximise the effectiveness of group-based interventions
  - Develop and embed targeted programs for people using violence with multiple overlapping priorities
  - Introduce externally ran specialist family violence services in prisons
  - Provide resourcing within contracts to collaborate with allied service providers
4. **Shift towards measuring outcomes within service contracts**
  - Develop an outcomes measurement framework in collaboration with service providers to better measure the impacts of behaviour change modalities
5. **Invest in improved information sharing**
  - Urgently investigate The Orange Door response to people using violence including:
    - Reports of rising suicidality and deaths by suicides
    - Discrimination experienced by marginalised people and communities
    - Consistent and effective TOD assessments and referrals of people using violence
  - Support expansion of the Central Information Point through improved processes to:
    - Assess and manage risk, including disclosing this information to victim-survivors
    - Rectify misidentification of the person using violence
    - Prioritising gathering data from system touchpoints for people using violence to reduce burdensome system engagement for victim-survivors