

# Health Justice Support for Families

Evaluation Report July 2022 - June 2024



**Westjustice**

Westjustice and our partners acknowledge the ancestors, Elders and families of the Kulin nations, who are the traditional owners of Western Melbourne, the country we are located on. As we work to achieve a just and fair society we pay respects to the deep knowledge embedded within the Aboriginal community and Aboriginal custodianship of Country. We acknowledge this land as a place of age-old ceremonies of celebration, initiation and renewal, and that the Kulin peoples' living culture has a fundamental role in the life of this region.

Westjustice and our partners acknowledge the significant long-term impact of family violence, intimate partner violence, and gendered violence for women, children, families, and our community. We also commend the strength and resilience of those individuals who have, and are still, experiencing this violence. We pay our respects to those who did not survive, and to their loved ones.

## Westjustice

### Sunshine

Level 7, 12 Clarke Street  
Sunshine VIC 3020  
Tel: + 61 3 9749 7720  
Email: admin@westjustice.org.au

### Werribee

Level 1/8 Watton Street  
Werribee VIC 3030  
Tel: + 61 3 9749 7720  
Fax: + 61 3 9749 8276  
Email: admin@westjustice.org.au

### Sunshine

Visy Cares Hub, 80B Harvester Road  
Sunshine VIC 3020  
Tel: + 61 3 9091 8237  
Fax: + 61 3 9091 8207  
Email: sunshine@westjustice.org.au

This Report was published in October 2024.  
© Western Community Legal Centre Ltd t/a Westjustice

Authors:  
**Cleona Feuerring**  
Legal Director

**Neshi Sooknandan**  
Program Manager

**Sarah Flint**  
Lawyer

For more information regarding the contents of this report please contact:

**Cleona Feuerring**  
Legal Director,  
Phone: (03) 9749 7720  
Email: HJP@westjustice.org.au

### Partners:





## TABLE OF CONTENTS

<b>1</b>	<b>Executive Summary</b>	<b>7</b>
<b>2</b>	<b>Introduction</b>	<b>13</b>
<b>3</b>	<b>The problem</b>	<b>17</b>
<b>4</b>	<b>The solution</b>	<b>21</b>
	Victim survivors	18
	Practitioner capacity building	18
<b>5</b>	<b>Growth of the service</b>	<b>25</b>
<b>6</b>	<b>Our vision and goals</b>	<b>29</b>
<b>7</b>	<b>Clients</b>	<b>35</b>
<b>8</b>	<b>Services</b>	<b>39</b>
<b>9</b>	<b>Client stories</b>	<b>43</b>
<b>10</b>	<b>Practitioner collaboration</b>	<b>47</b>
<b>11</b>	<b>Findings &amp; Recommendations</b>	<b>51</b>
<b>12</b>	<b>Future focus</b>	<b>55</b>
<b>13</b>	<b>Funding</b>	<b>59</b>
<b>14</b>	<b>Acknowledgements</b>	<b>61</b>



**EXECUTIVE SUMMARY**



## 1 EXECUTIVE SUMMARY

There is a plethora of both national and global academic reports substantiating that women who are pregnant or have newborn children are at heightened risk of the onset or escalation of family violence from an intimate partner.

Family violence not only affects the mother but also the unborn baby and her children's physical and mental health. Children who experience family violence were almost five times more likely to receive treatment from a mental health service by the time they turned 18 than children who had not experienced violence. Significantly, girls who witness violence towards their mother are much more likely to experience intimate partner violence as adults.

Our Health Justice Support for Families (HJSF) integrates legal, medical and social services to wrap around the victim survivor Mother. HJSF is a 3 way partnership with Westjustice, Werribee Mercy Hospital (Mercy Hospital) and Wyndham City Council's Enhanced Maternal and Child Health Team (EMCH). Our partnership advances the safety of antenatal women and birthing parents (women) allowing for the continuation of non-legal support once they are discharged from Mercy Hospital and back to their homes to then receive support from the MCHN team and with legal support from Westjustice at all levels of their journey. This service model enables us to be responsive to any change in the women's circumstances such as an increase in risk or severity of family violence.

This service is aligned with the Victorian Government's 10-year plan for ending family violence and all of the 4 pillars in the Federal Government's National Plan to End Family Violence against Women & Children 2022-2023 (the National Plan) focusing on 'Prevention', 'Early Intervention', 'Response' and 'Recovery'. We recognise that family violence does not end with victim survivors leaving the relationship or obtaining a Family Violence Intervention Order. In many instances family violence escalates once victim survivors decide to leave the relationship with parenting, property and other systems abuse issues used as another avenue to perpetrate family violence including financial abuse. The critical intersection between family violence, family law and child protection requires a holistic, flexible and trauma-informed approach which must be delivered by staff who have expertise in the ways that these areas of law overlap, particularly in cases of urgency and high levels of risk.

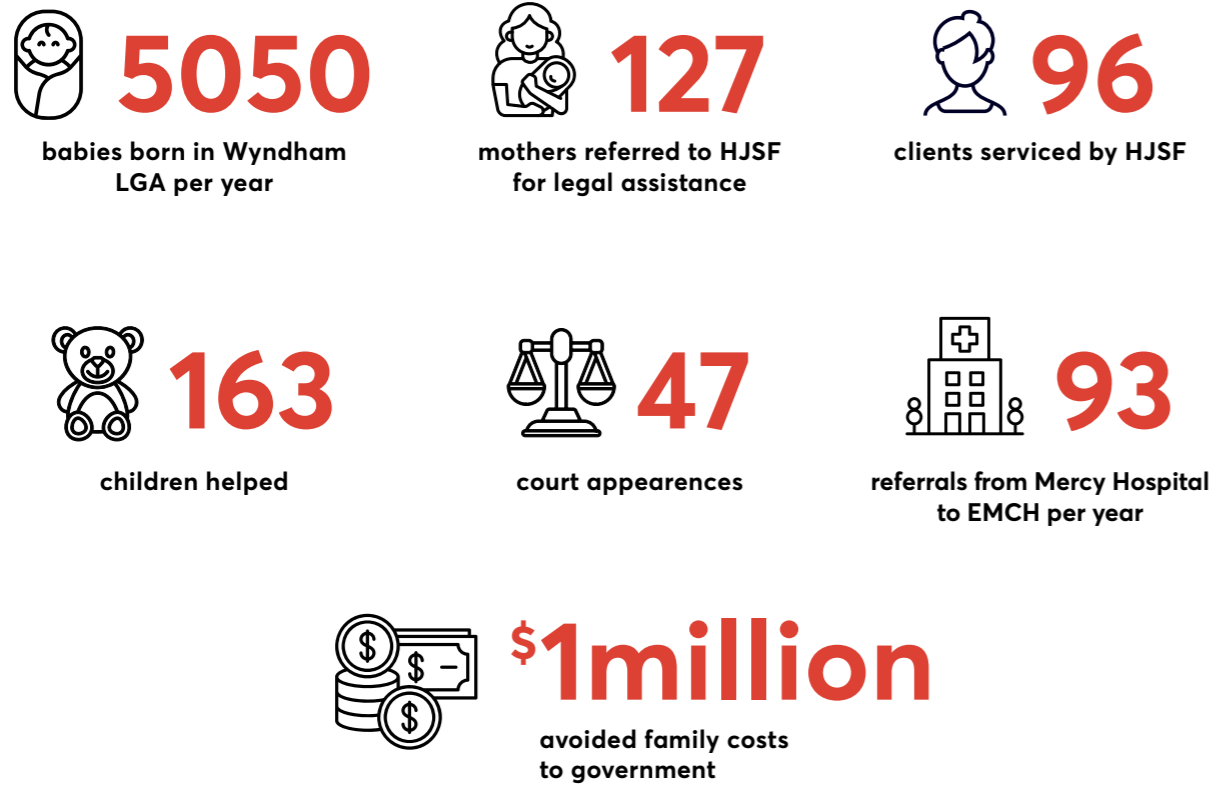
Child protection and family violence advice and casework is vital when addressing the second and third pillars of Early Intervention and Response in the objectives of the National Plan. In situations of DFFH involvement, early intervention legal advice supports women to address protective concerns raised by DFFH and engage with appropriate support services that assist them to keep their children safe and in their care. Family Law assistance is also essential in the Recovery and healing space both for safe parenting arrangements and financial security by increasing access and improving linkages and pathways from crisis and transitional housing to long-term affordable housing.

## KEY RECOMMENDATIONS

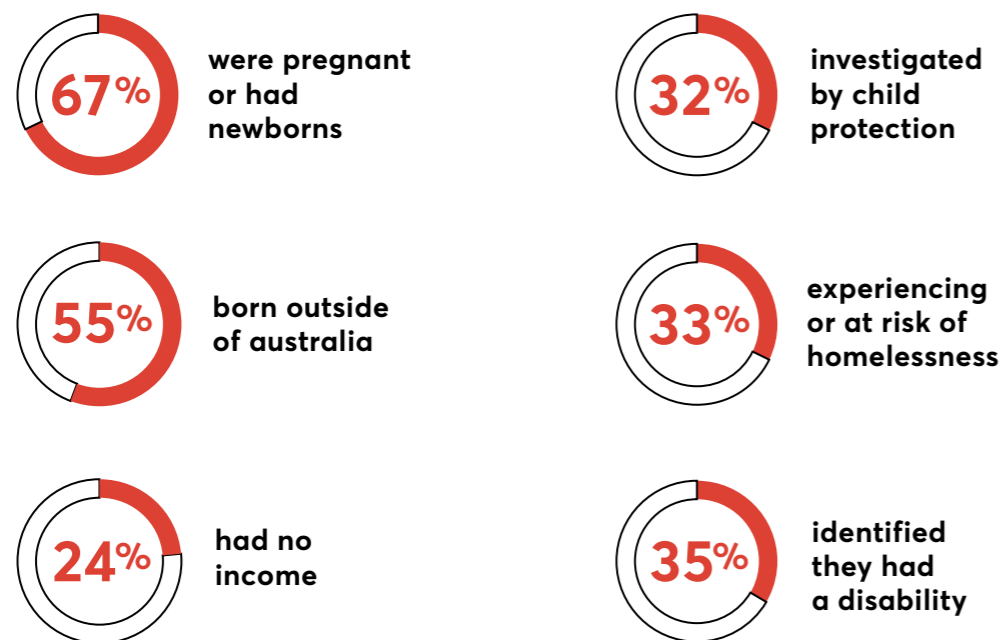
- 1. Provide secure long-term funding** for integrated and comprehensive multidisciplinary partnerships, including increased funding to grow our HJSF child protection practice and employ a financial counsellor to assist with the economic abuse victim-survivors experience.
- 2. Fund support services** so that all victim-survivors have access to:
  - safe housing options, including emergency accommodation and subsidised long-term housing.
  - basic necessities such as phones and Wi-Fi so that they are able to remain in contact with legal and non-legal support services.
  - affordable transport, including public transport and taxi services, to attend essential medical and legal appointments.
- 3. Community information sessions** that are culturally appropriate for Aboriginal and Torres Strait Islander and culturally and linguistically diverse people including, specialist family violence support that can assist with employment and volunteer opportunities for victim-survivors.
- 4. Therapeutic and mental health support** to enable recovery and healing for victim-survivors including children.
- 5. Improved access to anonymous interpreter services** which ensure that those experiencing family violence are not disclosing private information to a community member.
- 6. More Men's Behavioural Change type programs** that are offered in different languages and outside working hours to accommodate more men seeking support.
- 7. Increased targeted programs promoting healthy relationships and respect**, particularly for primary school aged children.
- 8. Recruit more social workers**, Enhanced Maternal Child Health Nurses and specialised family violence support workers.
- 9. Expand Health Justice Partnerships** which provide for onsite collaboration between health workers, social workers and lawyers in safe and private locations.

Figure 1: Impact Summary

## Impact Summary



## Our Clients







## 2 INTRODUCTION

In 2016, Westjustice's Family Program commenced a Health Justice Partnership with Werribee Mercy Hospital. Due to piecemeal and insufficient funding, the services offered to clients was limited to family violence advice and representation. In June 2022, we were the successful recipient of increased funding through the National Partnership on the Family, Domestic and Sexual Violence (NPA FDSV grant), which enabled us to expand our internal services and external partnerships.

The partnership, now called Health Justice Support for Families (HJSF), is a 3 way partnership with Westjustice, Werribee Mercy Hospital (the Mercy Hospital) and Wyndham City Council's Enhanced Maternal and Child Health Team (EMCH). We provide a critical entry point for the early intervention of family violence experienced by antenatal patients in the western suburbs of Melbourne. For many women and birthing parents referred to the program through our partnership, it is the best way they can access legal, health and social support without impacting on their safety. The safe and secure environment of a maternity ward, hospital setting, and maternal health nurse home and other visits is a unique and safe opportunity to deliver advice, education and support to women who might not otherwise feel comfortable or able to seek it out.

HJSF understands the important intersection between family violence, family law, child protection and criminal law, especially in reaching victim survivors at the earliest opportunity to assist in building both just legal outcomes and positive life outcomes for victim survivors and their children. In addition to the health and social support, we provide advice, ongoing legal assistance, and court representation to our antenatal clients. HJSF aims to be a driver of system change for the safety and wellbeing of birthing parents, carers and their children.

This report sets out the problems, solutions and demonstrates how the NPA FDSV grant has facilitated the growth and effectiveness of our partnership over the past two years. We present the accomplishments achieved through collaboration and communication between partner organisations and, importantly, highlight what is required to continue this essential work.





### 3 THE PROBLEM

#### Impacts of family violence during and after pregnancy

There is a plethora of both national and global academic reports substantiating that women who are pregnant or have newborn children are at heightened risk of the onset or escalation of family violence from an intimate partner. In Australia, 17% of women who experience family violence in a relationship experienced it for the first time during pregnancy and 35% of mothers experienced intimate partner violence between the birth of their first child and their child's tenth birthday<sup>1</sup>.

The recent National Plan to End Violence against Woman and Children 2022-2032 ("the National Plan") reveals that intimate partner homicide is the most prevalent kind of homicide in Australia. It also states that the risks of experiencing family violence increases for certain populations such as Aboriginal and Torres Strait Islander people, people with disabilities and migrant and refugee populations<sup>2</sup>.

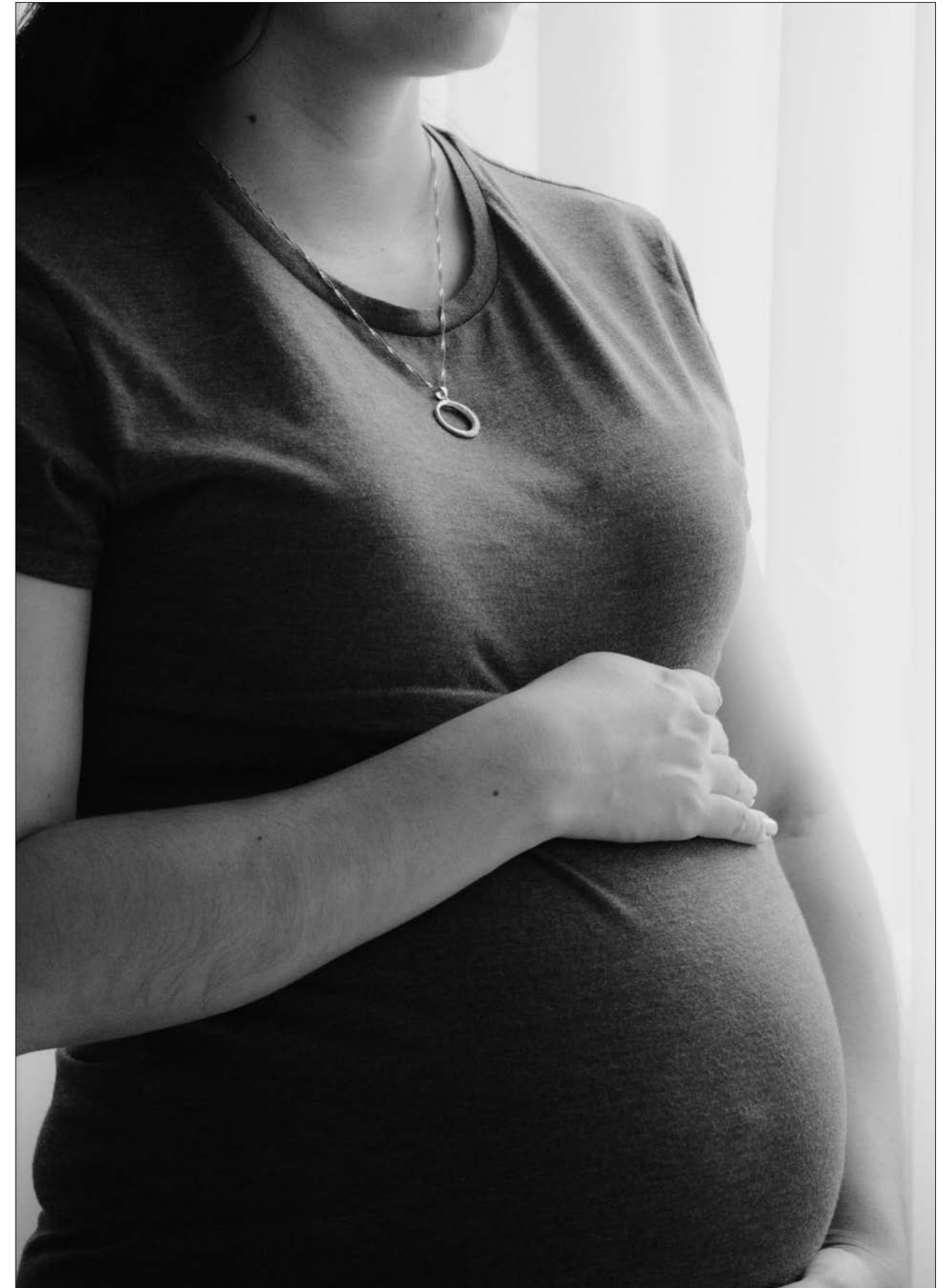
Family violence not only affects the mother but also the unborn baby and her children's physical and mental health. This can include a lower birth weight, miscarriage or premature labour, fetal distress and injury and depression. The anxiety and stress experienced by the mother during pregnancy can affect a child's mental health later in life<sup>3</sup>.

A Western Australian research study with 58,000 participants, found that children who had experienced family violence were almost five times more likely to receive treatment from a mental health service by the time they turned 18 than children who had not experienced violence (79% as opposed to 16%)<sup>4</sup>. Additionally, girls who witness violence towards their mother more likely to experience intimate partner violence as adults<sup>5</sup>.

Our HJSF is client led, takes a holistic approach and works across all four of the National Plan pillars of prevention, early intervention, response and recovery and healing.



**1 in 3** mothers experience family violence whilst their child is under 10





## 4 THE SOLUTION

### Victim survivors

While pregnancy is a high risk time for those experiencing family violence, it is also an opportune time for early intervention and the provision of services, as women have increased contact with health care professionals who can refer them through to other much needed services.

Women experiencing family violence are likely to initially disclose this to medical professionals and health services, who are often seen as trusted carers<sup>6</sup>. These professionals are well equipped to provide MARAM risk screenings and build safety plans with victim survivors of family violence, however they do not have the knowledge to help these women tackle the wide range of legal problems that often arise from family violence in the home. In our experience of working with victim survivors, we have found that that they experience clustered legal issues including but not limited to a range of family law, child protection, debt, tenancy and housing, criminal, immigration, employment, and victims of crime issues.

### Practitioner capacity building

In accordance with the aims of the National Plan, including principles of early intervention, it is crucial that health and social professionals have the capacity to identify legal issues exacerbating their patients' experiences of family violence. This can be done through community legal education, to assist practitioners to understand the law, better spot signs of risk and be more confident in making referrals to legal services where needed. Secondary consultations between legal and health practitioners to increase knowledge sharing and skill building is also another important outcome of our HJSF.

We have found that further collaboration between legal, health and social practitioners is also extremely beneficial in learning about manifestations of family violence in the health care space, including how to appropriately react to disclosures of family violence and what can be done within hospital settings to act in a discreet and trauma-informed manner.

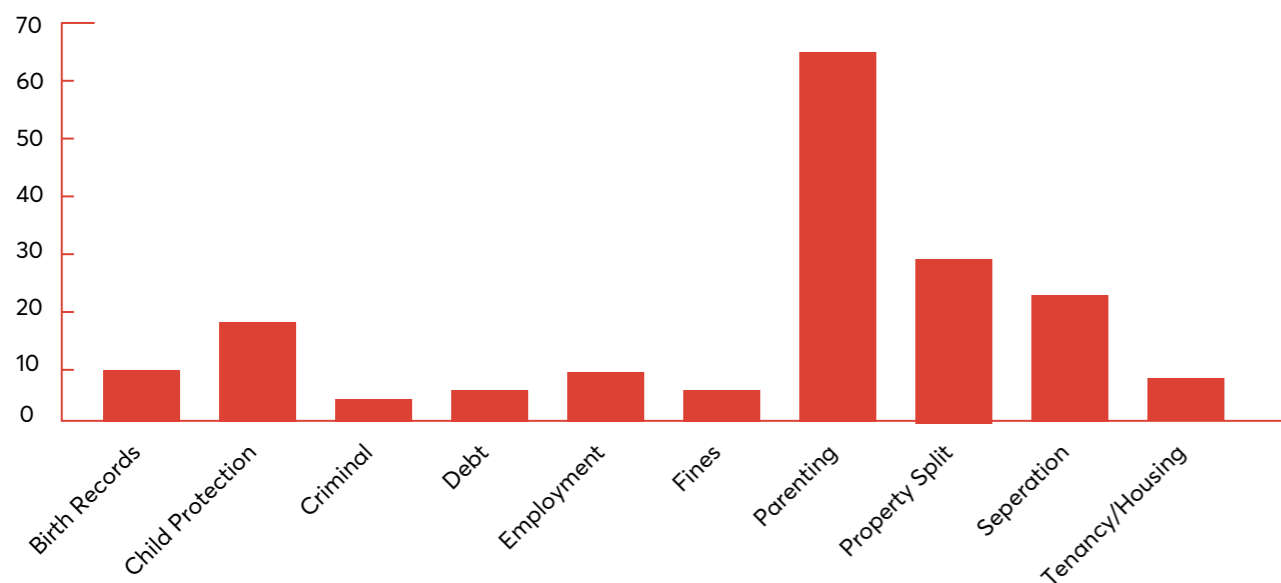
Women are better supported with holistic wrap around services and practitioners who communicate with each other as a care team. Additionally, this model creates an easier path to refer to other partners who can assist with safety plans, housing, access to financial supports and counselling, cultural support services, mental health assistance and parenting courses.

"Being a part of HJSF has improved awareness about offering referrals to Westjustice for legal advice. Referrals made to the Wyndham Enhanced Maternal Child Health team have also improved, enabling ongoing support for these vulnerable women. Evidence of awareness and appreciation is seen amongst our clinicians and social work team members, having an improved understanding of reasons to offer this service to our women. Education and training provided by West Justice is informative and many antenatal clinic midwives return to their working environment continuing to discuss the case studies presented.

We share a trusting relationship within the partnership and amongst team members referring to these services. We look forward to continuing in this partnership."

**Antenatal Midwife Clinical Coordinator  
Werribee Mercy Hospital**

**Figure 2: HJSF clients experiencing family violence also experienced these legal issues**







## 5 GROWTH OF THE SERVICE

Following additional funding for the project in 2022, the partnership developed further. Westjustice identified EMCH as a key additional partner organisation to compliment the continuum of support when patients are discharged from the care of Mercy Hospital with their newborns. EMCH joined the partnership as a primary partner in 2023. Westjustice also recruited, trained and upskilled lawyers for the project in the key legal areas presenting such as child protection and family law.

From our clients' experience we see child protection and family law as essential because family violence does not end with victim survivors leaving the relationship or obtaining a family violence intervention order. In many instances family violence escalates once victim survivors decide to leave the relationship with parenting and/or property issues used as another avenue to perpetrate family violence including systems abuse and financial abuse.

Child protection advice and casework is vital when addressing the second and third pillars of Early Intervention and Response in the National Plan to End Family Violence against Women and Children as is illustrated in Sophie's case study. For the fourth pillar of Recovery, housing is key to ending violence against women and children. Family Law advice and representation is crucial for both safe parenting arrangements and financial security. Fair and equitable property settlements allow women to find safe long-term affordable housing away from crisis and transitional housing.

"I have found having access to Westjustice to be invaluable to both my clinical practice and my ability to support the women I work with. For patients, having access to Westjustice's Clinic at Mercy has provided a safe place where they can meet with a legal representative to gain crucial information and education regarding their rights. This gives a sense of empowerment to make decisions around their and their children's future.

For some women, this is their only way of being able to access a legal service. The majority of our most vulnerable women would not be able to get the legal help they most desperately need. This service is imperative to our risk management when working with our most vulnerable patients."

**Senior Social Worker  
Werribee Mercy Hospital**

We have received more patient/client referrals than ever and therefore have provided more legal advice appointments, court representations and ongoing casework to HJSF clients with the grants received allowing for more hours to be put towards this important client group.

Westjustice also receives referrals from the Wyndham Vale Child and Family Hub and IPC health for vulnerable families who need legal assistance with family violence and other related legal problems. These referrals are also seen by the lawyers of HJSF.

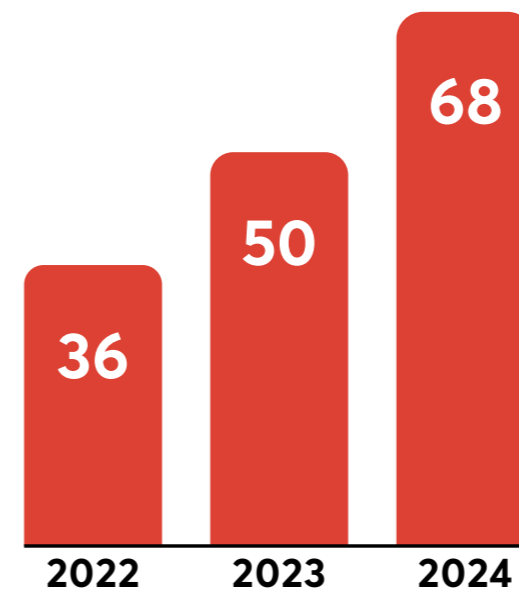
HJSF has also formed a formal Advisory Committee made up of staff members from the Mercy Hospital, EMCH and Westjustice. Terms of Reference, shared goals for the partnership

and other partnership resources were developed over a series of workshops with Health Justice Australia as a consultant. The Advisory Committee meets quarterly to share data, client outcomes and plan key events and tasks to support the functioning of the partnership.

Westjustice has continued to identify additional health services in the Western Suburbs as key referral pathways, in order to reach more at risk mothers and children, and also provide a network of support services to refer clients. These include WestCASA – a community based sexual assault counselling service, Tweddle – a statewide Early Parenting Centre and specialist public hospital supporting families with children aged from 0-4 years, and Caroline Chisholm Society – an organisation working with mothers and children who have experienced trauma to mitigate the need for child protection involvement.

As with our existing primary partners, these services assist women and birthing parents during their pregnancy and post pregnancy. These organisations also develop a high level of trust with their patients/clients and are trained to determine risk in situations of family violence. Therefore, they are well placed to determine the needs of their patients/clients and provide referrals to relevant services, including to legal services such as ours.

**Figure 3: Referrals per year**



\*As at August 2024





**OUR VISION AND GOALS**



## 6 OUR VISION AND GOALS

### Vision

To be the drivers of system change for the safety and wellbeing of birthing parents, carers, and their babies and children in the western suburbs of Melbourne. Our resilient, effective, and compassionate health and legal practitioners will provide safe access to timely early intervention in response to family violence within a continuity of care approach.

### Goals

**Goal 1:** Families are safe from all forms of violence

**Goal 2:** Accessible holistic wrap around legal and non-legal services for families

**Goal 3:** Positive legal, health, social and financial outcomes achieved

**Goal 4.** Strengthened partnerships and referral pathways





## 7 CLIENTS

The below statistics indicate the diverse nature of the clients, including culturally and linguistically diverse communities, people with disabilities and people experiencing homelessness and financial hardship. **All clients had experienced, or were at risk of experiencing, family violence**, and the impact of intersectionality on our clients influences their individual experience, and the clustered legal problems resulting.

Figure 4:

### Our Clients

**96** people provided with legal assistance



**163** children assisted indirectly through our representation



**55%**

born outside of Australia



**35%**

identified they had a disability



**24%**

had no income



**67%**

were pregnant or had newborns



**32%**

investigated by child protection



**11%**

required an interpreter



**33%**

experiencing or at risk of homelessness



**45%**

had Centrelink as sole income







## 8 SERVICES

Figure 5:



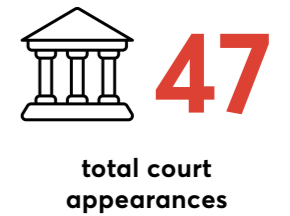
The remaining 31 people were identified as having legal conflict of interest and referred to another legal service; referred for help to other Westjustice programs or uncontactable after three contact attempts were made.



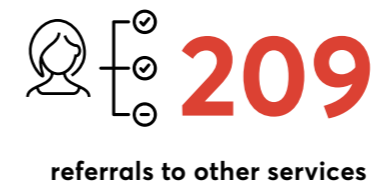
In the legal areas of family violence, family law parenting arrangements and property settlements, child protection and divorce.



This number excludes appointments provided to clients with ongoing legal assistance and case work.



Includes appearances in the Magistrate's Court of Victoria, Children's Court of Victoria and Federal Circuit and Family Court of Australia.



All clients are provided with referrals to other services where appropriate, including:

- family violence support
- housing services
- mental health/counselling
- financial counselling
- mediation
- Centrelink/Services Australia
- Victoria Legal Aid
- other community legal centres





## 9 CLIENT STORIES<sup>7</sup>

### CASE STUDY:

**Tina** came to Australia in 2019 to be with Tony. Tina and Tony leased a rental property and had 3 children together. Due to Tina's visa status, she was not entitled to receive the Centrelink parenting payment but was receiving Family Tax Benefit. When we first met with Tina, she required assistance with the following issues:

- Tony had left the relationship and their rental property and stopped paying any rent;
- She had sole care of the 3 children under the age of 5. Tony was not paying child support;
- Tina had received a Notice to Vacate for rent arrears and a Possession Order application by the landlord at VCAT and was facing homelessness with 3 children;
- In addition to experiencing economic abuse from Tony, Tina was also experiencing psychological abuse from Tony's new partner Tamara;
- Centrelink has stopped all benefits to Tina.

Westjustice provided Tina with advice about the above areas of law. Tina was able to reinstate her Family Tax Benefit and received a back-payment from Centrelink. She used this to pay her rental arrears. Tina was also internally referred to the Westjustice tenancy team who assisted her at VCAT.

We were able to negotiate parenting agreements with Tony's lawyer, which were finalised in the Federal Circuit and Family Court of Australia by way of consent orders. These orders allowed Tina to return to her country of birth with the children where she has the support of family and friends in raising her kids.

### CASE STUDY:

**Sophie** arrived in Australia with her husband four years prior to our engagement with her. During her first appointment with Westjustice, Sophie was pregnant with her second child and receiving antenatal care at the Hospital. She was experiencing family violence in her relationship and struggling with mental illness and financial instability. Sophie felt she could not afford to leave the relationship as her husband controlled their finances and she could not access centrelink payments or child support due to her visa status. DFFH had commenced an investigation due to the family violence, and a Protection Application was filed in the Children's Court in relation to Sophie's two children, with DFFH seeking to place them in out of home care.

Westjustice were informed about the Protection Application on the day prior to the first Children's Court hearing. A lawyer from our team was able to assist Sophie at court and secured an Interim Accommodation Order to Sophie, which allowed for the children to remain in her care whilst she received appropriate mental health treatments and supports from the Hospital and EMCH.

The HJSF team also assisted Sophie:

- with an application for a Family Violence Intervention Order which excluded her husband from the home.
- with access to the Hospital social worker.
- with access to case management by EMCH for targeted in home support with her newborn.
- by referring her to a migration lawyer regarding her visa status which also assisted her in being able to access Centrelink payments and child support.
- with a referral to a financial counselling service.

We continue to work with Sophie to assist her in gaining financial independence and will continue to represent her in any parenting or property proceeding that may arise with her husband in addition to divorce proceedings. Due to legal advocacy and representation, as well as social and health supports through HJSF, DFFH are supportive of Sophie continuing to have primary care of her baby thereby circumventing this child being placed in out of home care.







## 10 HEALTH AND LEGAL PRACTITIONER COLLABORATION

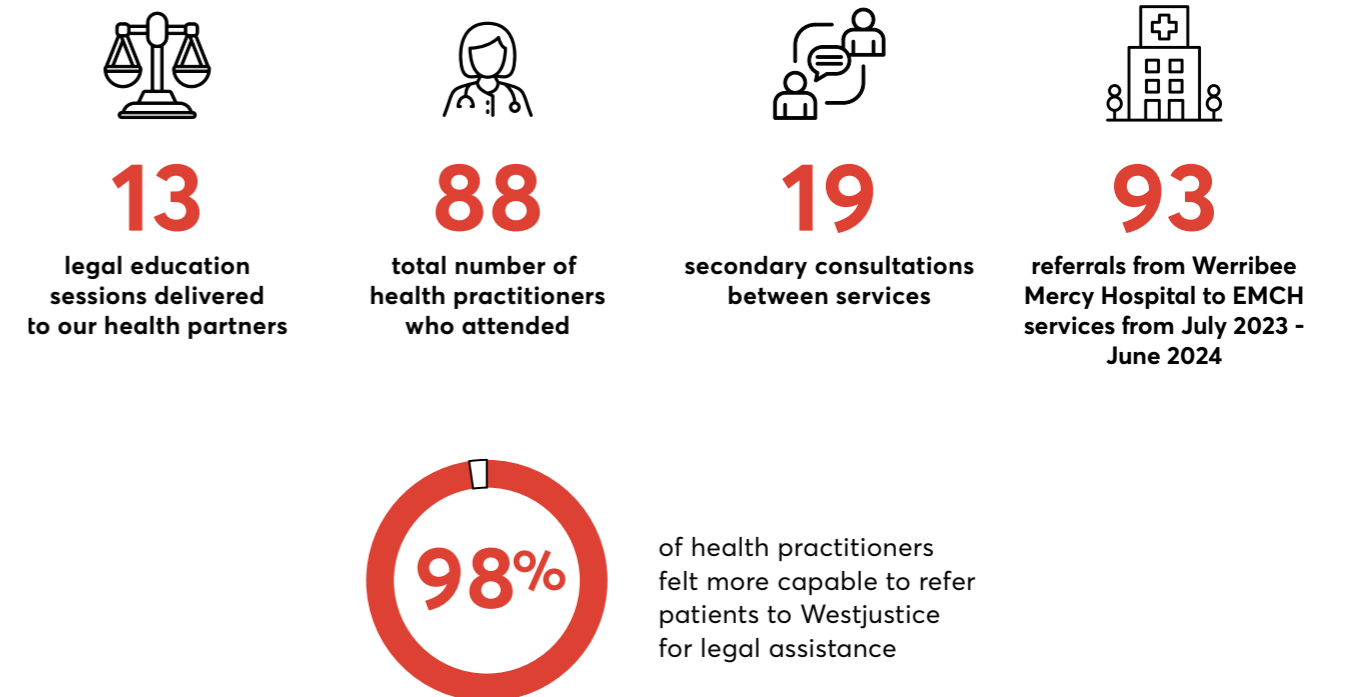
Community legal education sessions were delivered by our lawyers onsite to our partners at Werribee Mercy Hospital, and Wyndham EMCH service. In addition we also presented legal education onsite to Tweddle, Westcasa and Caroline Chisholm.

We have also developed promotional resources such as posters, flyers and business cards, attended joint meetings and engaged in secondary consults sharing knowledge between practitioners.

"Partnering with Westjustice has greatly improved Enhanced MCH approaches in early intervention with young children who are impacted by family violence. I have completed numerous referrals for victim survivors accessing the EMCH program with children who have been able to access timely advice, duty lawyer services and additional referral pathways. The partnership with Westjustice has greatly supported my practice in striving for continuity of care as clients have reported feeling safe and able to hold open conversations about their circumstances without fear of judgement in order to make informed choices regarding available options."

**Family Violence Worker  
Wyndham EMCH**

Figure 6:







## 11 FINDINGS AND RECOMMENDATIONS

### Barriers to Support

Family violence support services continue to observe major financial and practical barriers for victim survivors in accessing services. Those affected by family violence need to be in a secure and safe position in order to engage with the supports essential to improving their circumstances. Current barriers include access to:

- safe housing options, including emergency accommodation and subsidised housing.
- affordable transport including public transport and taxi services to be able to attend essential medical and legal appointments; and
- material aid including basic necessities, phones and wifi to be able to remain in contact with services.

### Support Service Gaps

Additionally, the following types of essential services are largely unavailable, not easily accessible or have extremely lengthy wait times for family violence victim survivors. Clients frequently state that such services would be extremely beneficial:

- CALD and Aboriginal and Torres Strait Islander women's groups which incorporate specialist family violence support, information sessions, employment and volunteer opportunities.
- Therapeutic and mental health support to enable recovery and healing for victim survivors, including children.
- Completely anonymous interpreter services which ensure that those experiencing family violence are not disclosing private information to a community member.
- More Men's Behavioural Change type programs that are offered outside working hours to accommodate more men seeking support.
- Programs promoting healthy relationships and respect, particularly for school aged children.
- Recruitment of more social workers, Enhanced Maternal Child Health Nurses and specialised family violence support workers.
- Broader Health Justice Partnerships which provide for onsite collaboration between health workers, social workers and lawyers in safe and private locations.



### Strengthened Partnerships and Referral Networks

The inclusion of the EMCH Team has greatly benefited the original partnership between Westjustice and the Hospital by allowing antenatal patients to continue to be supported once they are discharged from the Hospital and in their homes throughout of their journey of early parenthood. Further, our relationship with other key support services WestCasa, Tweddle and Caroline Chishlom Society, who also deliver services to women and birthing parents, has been foundational in creating referral pathways for holistic wrap around services.

These additions have resulted in a significant increase in referrals for legal support, with referrals for the first 8 months of 2024 exceeding referrals for all previous years.

Continued ongoing sustainable funding will allow us to continue to build and strengthen these partnerships and referral pathways to fulfill the HJSF vision and goals. With additional resources we can also expand our referral network to include crisis housing services such as McAuley Community Services for Women, Unison and Launch.

### Access to Child Protection Early Intervention

There is a critical intersection between family violence, family law and child protection that requires a holistic, flexible and trauma-informed approach which must be delivered by staff who have expertise in the ways that these areas of law overlap, particularly in cases of urgency and high levels of risk. In situations of DFFH involvement, early intervention legal advice supports women to address protective concerns raised by DFFH and engage with appropriate support services that assist them to keep their children in their care.

Delivering child protection legal education sessions to our partners and key referral agencies has seen an increase in referrals and child protection case work with 32% of our partnership clients having DFFH involved with their families in the last reporting period.

Funding during this period has enabled us to expand our team's child protection capacity in a preliminary way by upskilling graduate lawyers in child protection law, however we require additional funds to employ an experienced child protection senior lawyer to lead and grow this practice.

### Access to Financial Counselling

Economic abuse is very prevalent, and often a more subtle and invisible form of family violence perpetrated alongside other forms. The majority of our partnership clients experienced financial and economic abuse of some kind. Examples include a perpetrator:

- making their partner liable for debts they accrued,
- incurring infringements and credit card debts in their name;
- fraudulently applying for loans in their name; and
- controlling and fraudulently applying for Centrelink payments in their name.

Economic independence creates stability for women and their children which is imperative to safety and recovery from family violence, as noted in the National Plan to End Violence against Women and Children. However, accessing reliable and free financial counselling services to assist our clients is challenging because most services require a particular referral entry point and are not specialist, trauma-informed services that understand the intricacies of economic abuse.

It has become clear that there is a need for the support of a financial counsellor role within our HJSF. Where victim-survivors are unable to reach an independent and stable financial position, family violence can continue to be perpetrated in different forms. Our HJSF would benefit from integration of financial counselling, and we seek additional funding to grow this part of the program.



## 12 FUTURE FOCUS

- Continue providing legal assistance to all women and birthing parents referred to resolve complex and varied clustered legal problems from the impact of family violence.
- Continue representation of victim survivors in the Magistrates Courts for family violence intervention orders, including the new Wyndham Court when it becomes operational in 2026.
- Continue to represent victim survivors in Federal Circuit and Family Court of Australia to obtain safe parenting arrangements and fair and equitable property settlements for them.
- Continue to build a robust and well-functioning child protection legal practice to embed early intervention child protection legal assistance into HJSF and respond to urgent Protection Applications for mothers at risk of having their children removed from their care.
- Continue to strengthen and build our health partnerships and key referral networks to deliver holistic wrap around services to families in need.
- Develop and expand our evaluation systems to ensure a more comprehensive approach to recording and documenting the longitudinal benefits, positive life outcomes and cost savings to government.
- Employ a lived experience consultant on a casual basis to consult on the expansion of HJSF and its services and participate in Advisory Committee meeting.





# 13

FUNDING



## 13 FUNDING

Short term funding and pilots are tokenistic and disruptive to legal and health services and women, primary carers and their children. Funding uncertainty and continuous funding advocacy also takes valuable staff resources away from helping victim survivors, their children and the community. In addition, valuable legal expertise and lawyers may be lost due to the uncertainty of the future of the program and their employment.

We recommend increased long term funding so that we can further build and maintain an integrated and comprehensive multidisciplinary partnership which includes child protection, family law, family violence law and financial abuse services. The integration of multiple areas of law with a range of social services is critical to disentangling women from the abusive relationships that our clients experience.

We call on the State and Federal government to provide secure long-term funding for integrated services partnerships to prevent and address family violence against women and children in line with government plans to end family violence against women and children.

## ACKNOWLEDGMENTS

### Our Funding Partners



CLAYTON UTZ

### Our Team

#### Westjustice

Cleona - Legal Director  
 Neshi - Program Manager  
 Kirstyn - Senior Lawyer  
 Caitlin - Lawyer  
 Sarah - Lawyer  
 Jossel - Legal Administrator  
 Rebecca - Legal Administrator

#### Werribee Mercy Hospital

Natalie - Antenatal Midwife Clinical Coordinator  
 Kylie - Nurse Unit Manager, Outpatient Clinic  
 Cath - Social Work Manager  
 Sally - Senior Social Worker

#### Enhanced Maternal & Child Health

##### Wyndham City Council

Ruth - Service Lead, EMCH Program  
 Rachelle - Team Leader, EMCH Program  
 Jayme - Social Worker, EMCH Program  
 Karen - Social Worker, EMCH Program

### Consultants

#### Health Justice Australia

Cathy - Practice Development Lead  
 Ruth - Research and Evaluation Lead



## ENDNOTES

- <sup>1</sup> Australian Government, Australian Institute of Health and Welfare, 'Family, Domestic and Sexual Violence', 2024, see <https://www.aihw.gov.au/family-domestic-and-sexual-violence/population-groups/pregnant-people> and <https://www.aihw.gov.au/family-domestic-and-sexual-violence/population-groups/mothers-and-their-children>
- <sup>2</sup> Australian Government, Department of Social Services, 'National Plan to End Violence Against Women and Children 2022-2032', 2022, pg 72.
- <sup>3</sup> Australian Government, Australian Institute of Family Studies, 'Domestic and Family Violence in Pregnancy and Early Parenthood', pg 4.
- <sup>4</sup> Australia's National Research Organisation for Women's Safety, 'Children and Young People's Mental Health and Domestic and Family Violence: What's the Link?', 2015, see <https://www.anrows.org.au/publication/investigating-the-mental-health-of-children-exposed-to-domestic-and-family-violence-through-the-use-of-linked-police-data-and-health-records/read-summary/>
- <sup>5</sup> Australian Government, Australia Institute of Family Studies, 'Summarising the Evidence: Child Maltreatment', 2023, pg 5.
- <sup>6</sup> Health Justice Australia, 'Health Justice Partnership as a Response to Domestic and Family Violence', 2021, pg 2.
- <sup>7</sup> All case studies included in this report are deidentified and names used are pseudonyms. Common Anglo-Saxon names have been used both to deidentify the cultural background of the clients in these stories and to attempt to prevent the stigmatisation of any particular cultural group.

**Westjustice**

