

Research Brief Preventing Family Violence: What Does It Mean and Why Does It Matter?

Introduction

The landmark Victorian Royal Commission into Family Violence (RCFV) set out the importance of prevention as key to ending family violence. It recommended that the Victorian Government ensure that its action plan against family violence include a 'primary prevention strategy' (Royal Commission 2016). In response to this recommendation the Victoria Government developed and published 'Free from Violence: Victoria's strategy to prevent family violence and all forms of violence against women' (Victoria State Government 2017a) ('Victorian 'Free from Violence' strategy'). The Victorian Premier's introduction to the Victorian 'Free from Violence' strategy states that the 'approach to preventing family violence will be similar to other ... prevention initiatives such as the anti-smoking campaign ... [and] work to make our roads safer' (p. ii).

Cost of family violence

Substantively preventing family violence is uncontestably a laudable policy goal. Family violence costs individuals, communities, society and the economy dearly. Intimate partner violence (IPV), the most common form of family violence and violence against women, causes widespread physical, sexual and/or psychological harm. Family violence, as the predominant form of violence against women is also a human rights issue. The 1992 United Nations Convention on the Elimination of all forms of Discrimination Against Women (CEDAW) recognised that violence against women 'seriously inhibits women's ability to enjoy rights and freedoms on the basis of equality with men.'

Family violence is the leading preventable contributor to death, disability and illness in women aged 15-44 and is responsible for more disease burden than high blood pressure, smoking, and obesity (Webster 2016). Recent research by Victoria Police found that in 2016-17, family violence homicides in Victoria represented 28% of all homicides (Mills 2017). A 2015 report on the costs to the Australian economy of family violence estimated that violence against women costs Australia \$21.7 billion a year, of which \$12.6 billion is related to intimate partner violence (PriceWaterhouseCoopers 2015). It states that: 'There is opportunity for governments to invest in preventing violence before it occurs. Evidence from other countries shows that there are significant benefits from investing in prevention. We estimate that if similar reductions in violence were achieved as in prevention programs overseas, the benefits would range from \$37.8 billion to \$74.7 billion over a lifetime' (PriceWaterhouseCoopers 2015).

What does preventing family violence mean?

Generally, in policy terms, prevention is viewed as 'good' thing since social problems are seen to be 'bad' things (Freeman 1992). This is the case whether or not the issue is public health or crime. Indeed the connection with public health initiatives are evident in the Victoria Government policy document cited above. Any understanding of prevention has two associated strategies: the ability to predict an outcome and the ability to intervene in

(i.e. change) that predicted outcome. In other words, understanding prevention assumes cause and effect are also understood. This is not simple or straightforward in relation to public health; neither is it simple or straightforward in relation to violence against women. Different ways of thinking about cause and effect in relation to such violence result in different models of prevention all of which may, or may not, impact on such violence. It is possible to identify at least four models of violence prevention: the mechanistic model, the ecological model, the spectrum of prevention model, and the responsive model. All of these models invoke different points of prevention, different roles for the different actors in prevention, and importantly assume different views on the cause(s) of family violence.

A mechanistic model of prevention assumes an input-output and/or incident focused view of the causes of violence against women and what can be done about it. For example, historically much work focused on violence against women paid attention to the psychological impacts and effects of violence resulting in 'battered woman syndrome' (Walker 1984) as a result of 'learned helplessness'. Other work in this vein focused attention on the witnessing of violence by children, with Wolfe et al (2003) concluding exposure to such violence is categorically harmful to children. In policy terms this kind of work lends itself to therapeutic intervention for families exposed to such violence, whilst at the same time potentially denuding those experiencing such violence of their own skills in making sense of their lives. In particular this approach has resulted in the removal of children from violent situations, which simultaneously can remove the child from the stability and care of a positive parenting figures in their lives (more often than not their mother).

The ecological model (favoured by the World Health Organisation) assumes there is no one single cause of violence (family or otherwise) but rather that violence is the outcome of how different factors relating to the individual, their relationships, the community and society interact with one another. Importantly this model is rooted in the assumption that some individuals and/or groups are at greater risk of interpersonal violence and others are more protected from it. This leads to interventions resting on the assumed quality of the evidence associated with such risk factors and how they have been understood. This evidence base makes assumptions about the concept of risk itself (discussed more fully below). Later iterations of this model have become more complex and have endeavoured to capture the interactive and integrated nature of these factors (see for example, Heise 2011). The policy responses generated by this model eschew focusing attention on individual psychopathologies alone, and instead argue that policy interventions are needed at all points in the model, and/or resources need to be allocated to addressing the violence of the most dangerous risk factors (as identified by the model).

The theme of an integrated response to prevention is foregrounded by Cohen and Swift's (1999) model of a spectrum of prevention. This model assumes the need for comprehensive and collaborative initiatives at each of the levels of the ecological model. The spectrum of prevention moves from strengthening individual knowledge and skills, to promoting community education, educating providers, fostering coalitions and networks, changing organisational practices, and influencing policy and

legislation (Cohen and Swift 1999: 203-207). This implies the need for change at all levels with the requirement that the effectiveness of such changes be subjected to ongoing evaluation. Interestingly this model shifts attention away from either individual violent offenders and/or the role of individual agencies. It centres on the requirement for a holistic, integrated response, placing the cause-effect equation squarely in the realm of the social. It is possible to discern elements of this model in the distinctions made in the Victorian 'Free from Violence' strategy in the embrace of the concept of a 'continuum of prevention' discussed below.

The responsive model of prevention focuses on the quality of any intervention and/or interaction that occurs within the context of violence. This approach is essentially grounded in understanding what violence means to those involved in it (see Hyden, Gadd and Wade 2016). This emphasises the importance of context. For example, Genn's (1988) observation that violence in women's lives was 'just part of life' implies the need to understand the totality of their lives. Violence may be part of women's lives but does not define them. Neither does it define their children, their relationships with their wider family or community. These wider networks are important resources for both action and inaction and need to be understood as framing the possibilities for any professional intervention. Thinking through the role of violence in people's real lives in this way poses challenging questions for what meaningful and effective intervention might look like in a wide range of contexts but particularly in Indigenous communities.

Standard definitions

The Victorian 'Free From Violence' strategy refers to 'the continuum of prevention', categorising prevention into three temporally determined types; primary, meaning preventing violence before it occurs; secondary, also termed 'early intervention', meaning intervening early to prevent violence recurring; and tertiary intervention, meaning preventing long-term harm from violence. These three types of prevention are aimed at different groups: primary prevention at the population as a whole; secondary at individuals and groups thought to be at high risk of being perpetrators or experiencing violence; and tertiary at those who have perpetrated or experienced violence.

The strategies linked to each type of violence are also different. Primary prevention is targeted at what are seen as the drivers of family violence and violence against women. In the introduction to the Victorian 'Free from Violence' strategy the Victorian Premier states that because gender inequality is a known driver of violence against women the prevention strategy is accompanied by a gender equality strategy 'Safe and Strong' (Victoria State Government 2017b). A United Nations (2011) review found significantly higher rates of violence against women in countries where women's economic, social and political rights are inadequately protected. Even in countries that enjoy relatively high levels of gender equality however, such as Sweden, gendered violence including intimate partner violence and homicides persist (Fundamental Rights Agency 2014).

Prevention, harm and justice

Prevention (of family violence) is intended to end the harms resulting from such violence. However, the success of such initiatives can rest upon the extent to which the sensitivities of those targeted by such initiatives are accounted for in the

policies and practices put in place. Sometimes harms can result from the interventions themselves. This is especially the case when policies assume a unitary and uniform understanding of risk and risk factors as though these concepts mean the same and are applicable to everyone uniformly (see O'Malley, 2004; Walklate, 2018). Such assumptions can permeate practice resulting, for example, in the separation of families rather than ensuring the violence ends (though see Hartwig, 2016, on promising work from the Safe at Home initiative in Western Australia). Failing to recognise such sensitivities can contribute to the further victimisation of families, particularly from Indigenous backgrounds, and can also contribute to the denial of alternative ways of thinking about what a just response might look like for those living with violence (Goodmark, 2017).

Conclusion

Preventing family violence and its devastating, health, social and economic costs is an important policy goal. There are different types of prevention and different models of preventing family violence based on different understandings of why family violence occurs and what factors and approaches are most likely to work to ensure it stops. However there remains limited research and evaluation which points to the effectiveness of family violence prevention policies.

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