

25 March 2025

Select Committee on Measuring Outcomes for First Nations Communities Department of the Senate
PO Box 6100
Parliament House

Canberra ACT 2600

By Email: measuringFNoutcomes.sen@aph.gov.au

NSW Aboriginal Women's Advisory Network's submission to the Select Committee on Measuring Outcomes for First Nations Communities

The NSW Aboriginal Women's Advisory Network ('AWAN' or 'the Network') thanks the Select Committee for the opportunity to comment on the Inquiry into Measuring Outcomes for First Nations Communities.

The [NSW Aboriginal Women's Advisory Network](#) was established in 2022 and operates as a mechanism to drive Aboriginal-led policy solutions to the NSW Government Closing the Gap Target 13 initiative to reduce the rate of all forms of family violence and abuse against Aboriginal and Torres Strait Islander women and children by at least 50% by 2031 as progress towards zero.¹

AWAN's Executive Council is led by Co-Chairs from Wirringa Baiya Aboriginal Women's Legal Centre ('Wirringa Baiya') and the Aboriginal Legal Service (NSW/ACT) ('ALS'). ALS is the Coalition of Aboriginal Peak Organisations (CAPO) lead on Target 13. Wirringa Baiya is the organisation that auspices the AWAN secretariat. Both Wirringa Baiya and AWAN are gender-specific and sensitive to the culturally diverse needs of Aboriginal and Torres Strait Islander women and children victim-survivors of domestic, family and sexual violence.

AWAN works to reduce violence against Aboriginal women and children through the following multi-pronged approach:

- *Educating community* around issues of domestic, family and sexual violence against Aboriginal and Torres Strait Islander women and children.
- *Empowering Aboriginal and Torres Strait Islander women* across New South Wales with opportunities to provide their insights on issues that impact themselves, their families, and their communities.
- *Representing the voices of Aboriginal and Torres Strait Islander women to government* at the NSW State and Australian Federal levels.
- *Representing the voices of Aboriginal and Torres Strait Islander women to frontline services.*

¹ NSW Government, 2022-2024 NSW Implementation Plan for Closing the Gap, 109.

- *Advocating for better protections and support in community for Aboriginal and Torres Strait Islander women and children.*

AWAN has over 450 members and we invite members to inform to all submissions. Specific consultations were held with AWAN members to inform this submission. AWAN has a process of regular consultation with Aboriginal community and members of the Network. We have engaged with Aboriginal & Torres Strait Islander women across urban, regional, remote and very remote communities to ensure our feedback to policy and law reform processes is informed by the insights shared directly with us to amplify the voices of Aboriginal and Torres Strait Islander Women.

Opening statement

Aboriginal and Torres Strait Islander (First Nations) people are overrepresented as both victim-survivors and perpetrators of family and domestic violence (that is, violence that occurs within family or intimate relationships).² Family violence is not an Aboriginal and Torres Strait Islander community problem – it is a gendered issue and is not part of our culture. Historic and ongoing settler colonialism must be considered as the key underlying driver of violence against First Nations women, underpinned by settler colonial violence which reflects a ‘logic of elimination’ that relies on dispossession and displacement.

The ongoing impacts of colonisation and gendered factors as the key causes and drivers of violence against First Nations women and children. Prior to colonisation, robust kinship systems served as a foundation for social organisation which ensured the cohesion and stability of Aboriginal communities. Family, Domestic and Sexual Violence (FDSV) in Aboriginal and Torres Strait Islander communities is intrinsically linked to intergenerational trauma directly linked to the legacy and impacts of colonisation.

There is significant evidence to show that violent policies and practices, including the forced removal of children, dispossession of land and identity, institutionalisation and assimilation, violence by non-Indigenous men, and the breakdown of cultural practices and kinship systems result in ongoing intergenerational trauma, disempowerment, and social and economic exclusion³.

This is further influenced by entrenched poverty and political marginalisation, substance abuse and the loss of traditional gender structures⁴. The impact of these factors is still being felt among Aboriginal and Torres Strait Islander communities and sits at the heart of family violence⁵. The gendered drivers of violence against First Nations women include the intersection of racism and sexism, and the impacts of colonial patriarchy on gender roles, and interpretation of what constitutes violence against women that can differ from western norms.⁶

² Cripps K (2023) Indigenous domestic and family violence, mental health and suicide
AIHW, Australian Government, accessed 26 February 2025.

³ Douglas, H., McGlade, H., Tarrant, S., and Tolmie, J. 2020. Facts seen and unseen: improving justice responses by using a social entrapment lens for cases involving abused women (as offenders or victims). *Current Issues in Criminal Justice* 32 (4): 488-506

⁴ SNAICC – National Voice for our Children, National Family Violence Prevention Legal Services (NFVPLS) and National Aboriginal & Torres Strait Islander Legal Services (NATSILS) (2017) *Strong Families, Safe Kids: Family violence response and prevention for Aboriginal and Torres Strait Islander children and families*, SNAICC.

⁵ Guthrie, J., Thurber, K., Lovett, R., Gray, M., Banks, E., Olsen, A., Calabria, B., Priest, N., Dance, P., Thandrayen, J., Colonna, E., Cohen, Brinckley, M., Wells, S., Salmon, M., Doery, K., Movva, N., Dunbar, T., and Hovane, V (2020). *The answers were there before white man come in’: stories of strength and resilience for responding to violence in Aboriginal and Torres Strait Islander communities – Family and Community Safety for Aboriginal and Torres Strait Islander Peoples Study Report*. Australian National University.

⁶ Langton M, Smith K, Eastman T, O’Neill L, Cheesman E and Rose M (2020) *Improving family violence legal and support services for Aboriginal and Torres Strait Islander women (Research report 25/2020)*- external site [opens in new window](#), ANROWS, accessed 19 May 2023

From the outset, addressing family violence (Target 13) is intrinsically connected to addressing all Closing the Gap targets and therefore necessitates a whole of Government approach. This demands a need to addressing social determinants of health through evidence-based and culturally safe policy changes and community-based interventions is key to achieving Closing the Gap targets. With support from culturally safe services, Aboriginal and Torres Strait Islander women and their children can remain safe and together.

The latest March update of the Productivity Commission's Closing the Gap Dashboard, which measures progress towards the National Agreement on Closing the Gap that four targets are now on track to be met and a further six targets show improvement but are not on track to be met. Outcomes are worsening against four targets and a further four targets are not able to be assessed.

In the review of progress towards the National Agreement on Closing the Gap, Commissioner Selwyn Button concluded that Governments have not taken enough meaningful action to meet their commitments under the Agreement. NSW AWAN echoes the calls of Commissioner Selwyn Button to prioritise meaningful actions to commit to implementing the Closing the Gap priority reform areas and shift from policy to on the ground funding and implementation.⁷

The latest March update of the Productivity Commission's Closing the Gap Dashboard, which measures progress towards the National Agreement on Closing the Gap that four targets are now on track to be met and a further six targets show improvement but are not on track to be met. Outcomes are worsening against four targets and a further four targets are not able to be assessed.

Our Network draws attention to the partnership principles in the Closing the Gap Partnership Agreement to strengthen relationships between Government and Aboriginal Community Controlled organisations (ACCOs)⁸ which are transparency, accountability, acknowledging demands of shared decision-making, mutual respect, and inclusion.⁹

⁷ *New Closing the Gap data shows focus on Priority Reforms by governments needed to see real improvement - Media release.* (2025). Pc.gov.au. <https://www.pc.gov.au/media-speeches/media-releases/2025/new-closing-the-gap-data-march-2025>

⁸ *NSW Partnership Agreement* between New South Wales Coalition of Peak Organisations, the New South Wales Government and Local Government New South Wales, February 2024.

⁹ Ibid 7.

Recommendations

Recommendation 1: Prioritise funding Aboriginal Community Controlled Organisations (ACCOs) to deliver community driven, place based, gender specific, Aboriginal-led Domestic, Family and Sexual violence (DHSV) programs

Recommendation 2: Funding allocations to mainstream organisations must be detailed, transparent and publicly accessible

Recommendation 3: ACCO's need to be prioritised and sufficiently funded, and mainstream services are held accountable for cultural safety and accessibility by the Aboriginal and Torres Strait Islander community and report to Government in relation to accessibility and cultural safety.

Recommendation 4: Strengthen data collection to record the links of Target 13 (reduce rates of all forms of family violence abuse against Aboriginal and Torres Strait Islander women and children) to shape pro-active preventative policies and funding frameworks

Recommendation 4: Empower communities to access vital early intervention services proactively without fear of repercussions from child protection agencies, necessitating appropriate reform of the child protection system. Efforts should be made to actively encourage engagement with early intervention support services and the provision of community-led wraparound services

Recommendation 6: Governments needs to prioritise funding programs for women in custody to address the poorly understood overlap between imprisonment and domestic and family violence and sexual violence (DHSV). There is a need to recognise the importance of continuity of services, case management, pre-release planning and throughcare for women in custody, as well as to develop and fund culturally relevant diversionary initiatives such as The Glenn for Women and Kamira rehabilitation centre.

Recommendation 7: Complement quantitative data with qualitative methods such as community interviews, participatory action research, and case studies. This mixed-methods approach will provide a richer, more accurate picture of HSV and its ripple effects across communities.

Recommendation 8: Embed healing and reconciliation targets into the Closing the Gap targets by actively prioritising action on reconciliation and anti-racism initiatives, including implementing the National Anti-racism framework.

Recommendation 9: Implement the Australian Human Rights Commission recommendation for Government to develop a national program to implement UNDRIP and schedule it to the definition of human rights in the *Human Rights (Parliamentary Scrutiny) Act 2011* (Cth)

Recommendation 10: Develop Comprehensive Wellness Indicators to complement the Australian Government's National Wellbeing framework

The ways in which the targets are funded

Recommendation 1: Prioritise funding Aboriginal Community Controlled Organisations (ACCOs) to deliver community driven, place based, gender specific, Aboriginal-led Domestic, Family and Sexual violence (DFSV) programs

The NSW Aboriginal Women's Advisory Network recommends that Governments adequately resource and invest in Aboriginal Community Controlled Organisations (ACCOs) to deliver community driven, place based, gender specific, Aboriginal-led Domestic, Family and Sexual violence (DFSV) programs.

Self-determination has been recognised as central to preventing and responding to domestic, family and sexual violence against Aboriginal and Torres Strait Islander people¹⁰. Community-led approaches empowering First Nations communities to take control of funding allocations ensures that Aboriginal and Torres Strait Islander ways of knowing, being and doing are centred to ensure that DFSV interventions are culturally appropriate and tailored to the unique contexts of each community.

The way the targets are funded needs to be increased, and they need to reflect the strong language in the national agreement about handing power to Aboriginal communities. There needs to be a much higher investment directly into the priority areas that have been identified by Aboriginal people in their communities embedded in Aboriginal ways of knowing, being, and doing.

Directing resources toward Aboriginal-controlled organisations aligns with the Commonwealth Government's commitments under Priority Reform 2 to build the community-controlled sector by increasing the amount of government funding for Aboriginal and Torres Strait Islander programs and services going through Aboriginal and Torres Strait Islander community-controlled organisations.

Recommendation 2: Funding allocations to mainstream organisations must be detailed, transparent and publicly accessible

Despite Closing the Gap's stated commitment to Aboriginal self-determination, a significant portion of funding continues to flow to large, mainstream service providers rather than ACCO's. Mainstream service responses to family violence in Aboriginal and Torres Strait Islander communities have been proved to be unsuccessful due to a broad lack of cultural competence in terms of staff and service provision¹¹. Aboriginal and Torres Strait Islander agencies and services have long "emphasised the need for responses to consider local context, family connections and adopting an approach that supports healing".

¹⁰ Department of Social Services (DSS) (2022). National Plan to End Violence against Women and Children 2022–2032. Commonwealth of Australia

¹¹ Queensland Centre for Domestic and Family Violence Research. (2019). *Prevention, early intervention and support for Aboriginal and Torres Strait Islander people who have experienced sexual violence* (Practice paper, February 2019). QCDFVR.

Too often, funding is allocated to mainstream organisations to achieve an outcome for Aboriginal and Torres Strait Islander communities when the funding would be better placed with Aboriginal Community Controlled Organisations. Of concern, funding allocated to mainstream services for programs to benefit Aboriginal and Torres Strait Islander peoples, but that funding is misused for alternative and vague purposes such ‘administration’ or ‘consultancy services’. Alternatively, funding may be positioned as for Aboriginal and Torres Strait Islander communities, when in fact the funding is allocated for another purpose which may incidentally have a benefit for Aboriginal peoples.

There are significant concerns around investments into mainstream companies which are declared to “flow through” or “trickle down” to Aboriginal communities. It is inappropriate for the federal Government to be funding millions towards mainstream organisations for the purpose of Closing the Gap, without adequate input or oversight from Aboriginal and Torres Strait Islander representatives or community organisations.

Funding decisions relating to identifying priority areas for investment and allocating such investments for Aboriginal and Torres Strait Islander outcomes must be done in collaboration and with the leadership of Aboriginal and Torres Strait Islander community representatives and community-controlled organisations. It is important for funding to be invested in organisations which have a proven record of commitment and success in achieving outcomes for Aboriginal and Torres Strait Islander peoples, as supported by the evaluations of the communities that they service.

The ways in which the targets are measured and evaluated

Recommendation 3: ACCO’s need to be prioritised and sufficiently funded, and mainstream services are held accountable for cultural safety and accessibility by the Aboriginal and Torres Strait Islander community and report to Government in relation to accessibility and cultural safety.

To allow communities to have choice and mitigate potential conflict, mainstream services need to be held accountable for cultural safety. Aboriginal community should have the choice to access services that are culturally safe- otherwise, the onus would fall on overstretched and underfunded ACCOs. There is a need to respect the diversity of the Aboriginal community who may prefer to access a mainstream organisation with a First Nations worker, and this may be due to family connections in another ACCO organisation. We also note the issues surrounding the fact that Non-Government Organisations that access significant government funding are not accountable under Closing the Gap targets.

The Commonwealth Government has committed under Priority Reform area 3 to Transform Government Organisations by ensuring that Governments, their organisations and their institutions are accountable for Closing the Gap and are culturally safe and responsive to the needs of Aboriginal and Torres Strait Islander people, including through the services they fund with Aboriginal oversight.

We note that a significant portion of funding is provided to the Non-Government Sector and they are not accountable under the Closing The Gap targets. We also note that our members have noted their concerns about the inherent barriers to cultural safety when essential mainstream services are funded by faith-based organisations. These services are historically tied to the colonisation experience faced by Aboriginal and Torres Strait Islander communities. An AWAN Member shared that “*we need to flip the narrative – instead of blaming and shaming communities, blame and shame the systems that exclude communities*”.

Mainstream services need to be held accountable and work towards cultural safety by addressing and acknowledging unresolved issues of racism. There is a need to acknowledge that organisations need to undertake a journey in cultural safety by building genuine relationships with the community. Building an Aboriginal workforce should be intentional and focussed upon ensuring that there is an organisation wide approach towards building cultural safety.

Mainstream services, including Government, Health, Police and Education need to be held accountable and work towards cultural safety by addressing issues of racism that may be present. There is a need to acknowledge that organisations need to undertake a journey in cultural safety by building genuine relationships with the community.

Mainstream service responses to family violence in Aboriginal and Torres Strait Islander communities have been proved to be unsuccessful due to a broad lack of cultural competence in terms of staff and service provision¹². Aboriginal and Torres Strait Islander agencies and services have long “emphasised the need for responses to consider local context, family connections and adopting an approach that supports healing”. Building cultural safety of mainstream services is an essential prerequisite prior to engaging Aboriginal identified positions.

Recommendation 4: Strengthen data collection to record the links of Target 13 (reduce rates of all forms of family violence abuse against Aboriginal and Torres Strait Islander women and children) to shape pro-active preventative policies and funding frameworks

As noted in the Missing and Murdered First Nations women and children report, there are discernible data gaps with respect to disappeared and murdered First Nations women and children. Once complete, the data will serve to better inform policy, services and program development, as well as recognise the loss suffered within our communities.¹³ The report, which has not yet been responded to by the Government recommended a nationally harmonised set of data that gives us a better picture on the rates of family and domestic violence that are happening in First Nations communities,

We support the measurement of additional indicators to create a broader picture of intersections, and recommend expanding indicator measurements to create a broader picture of intersections involving:

- Suicide
- Poverty and economic status
- Women in custody

Given that it is also unrealistic to achieve Closing the Gap Targets without addressing poverty, appropriate investments should also be made in people and communities.

¹² Queensland Centre for Domestic and Family Violence Research. (2019). *Prevention, early intervention and support for Aboriginal and Torres Strait Islander people who have experienced sexual violence* (Practice paper, February 2019). QCDFVR.

¹³Legal and constitutional Affairs Reference Committee, Missing and Murdered First Nations women and children, Missing and murdered women, p 172

The priority of the targets in the National Partnership Agreement and progress under the National Priority reforms

DFSV does not receive the attention it deserves developing funding arrangements that encourage collaboration across sectors to better address the interconnected nature of family violence with other Closing the Gap targets.

The experience of family violence is the Aboriginal and Torres Strait Islander person's connection to the child protection system, the youth justice system, adult criminal justice system, housing and/or homelessness, health, access to education and suicide rates. Addressing family violence (Target 13) is intrinsically connected to addressing all Closing the Gap targets and therefore necessitates a whole of Government approach. There are intersections between different targets which demand targeted programs and responses, particularly with respect to child protection (target 11) and women in custody (target 10).

Addressing social determinants of health through evidence-based and culturally safe policy changes and community-based interventions is key to achieving Closing the Gap targets. Federal, State and Territory Governments should put in place mechanisms to facilitate cross-portfolio coordination and a nationally consistent approach to achieving closing the gap targets.

Intersection of targets – Child protection

It is essential to ensure that safe spaces are built to encourage victim-survivors to access support without feeling policed by child protection services. Our consultations emphasised the barriers to engaging with systems that are influenced by systematic racism over multiple generations. The impact of child removals is far reaching.

It is well established that First Nations women avoid reporting family and domestic violence due to fear that child protective services will remove children from their care, influenced by historical experiences. This needs to be considered when interpreting the data in relation to the Closing the Gap indicator measurements regarding 'family violence before entry to out of home care'.

Some of the issues contributing to this underreporting include fear, mistrust and loss of confidence in the justice system, police, government agencies and media, fear of children being removed from country and community, a belief in the need to protect the perpetrator because of high numbers of indigenous deaths in custody and community pressures, a lack of culturally appropriate services and lack of knowledge about legal rights and services available¹⁴.

These fears of the child protection system should also be further contextualised within the history of colonialism and systemic racism experiences by First Nations communities and intergenerational trauma from a history of dispossession of land, children removal, family separation and displacement and loss of culture¹⁵.

Aboriginal children continue to be overrepresented in the out of home care system, with 43% of children in out of home care (OOHC) being First Nations children in 2022. Indigenous children are 10.5 times more likely to be in out of home care as compared to non-Indigenous

¹⁴ Australian Institute of Health and Welfare. (2024). 2.12 *Child protection*. AIHW Indigenous HPF. <https://www.indigenoushpf.gov.au/measures/2-12-child-protection>

¹⁵ Ibid.

children¹⁶ – the highest rate of over representation in the out of home care system ever recorded¹⁷.

There is a lack of acknowledgment of the harm caused by child removals and those who experience child sexual abuse with lifelong trauma impacts. Given that tens of thousands of Australia's children are in out-of-home care – and that many of these children are inherently vulnerable – it is critically important to reduce their exposure to further harm. Despite major reforms to out-of-home care in every state and territory in Australia, the Royal Commission into Institutional Responses to Child Sexual Abuse has identified persistent weaknesses and systemic failures that continue to place children at risk of sexual abuse¹⁸. Sexual abuse by carers, their family members, visitors, caseworkers and other children in care continues to occur in contemporary out-of-home care, and that sexual exploitation is a growing concern, especially for children in residential care. Systemic failings weaken the safety of children in care, including frequent placement changes, poor information sharing, inadequacies in service providers' responses to children's prior abuse and trauma, and significant gaps in the training and support provided to staff and carers, especially kinship carers.

There exists a well-known link between OOHC and involvement in the youth and adult criminal justice system. The cost of OOHC requires investing resources earlier in the system to divert children from care and to ensure better outcomes for children and families.

The Family Matters Report 2023 highlights that in order to achieve Target 12 of the National Agreement to reduce over-representation of Indigenous children in OOHC, there is a need to focus on enabling children to stay safely at home with their families and maintaining connection to culture and community. There is a need to expand early support for families and broader efforts to address the underlying issues resulting in the removal of Indigenous children from their families into OOHC¹⁹.

Recommendation 5: Empower communities to access vital early intervention services proactively without fear of repercussions from child protection agencies, necessitating appropriate reform of the child protection system. Efforts should be made to actively encourage engagement with early intervention support services and the provision of community-led wraparound services

Access of families to family preservation programs should not be limited to Risk of Significant Harm (ROSH) reports. Communities should be able to decide what services they need and facilitate access to services on their terms with walk in one stop-shop services. Members have shared that being passed from service to service and waiting for hours is disheartening. Walk-in services allows survivors to access services on own terms in recognition of the imposition of protection services being tied intrinsically to colonisation. Service design should enable communities to decide what services they need and facilitate the opportunities to access those service on their terms by accessing one-stop shops and facilitated referral services. As articulated by a participant, such a solution would effectively

¹⁶ Ibid

¹⁷ SNAICC. (2023). Family Matters. SNAICC – National Voice for Our Children. <https://www.snaicc.org.au/our-work/child-and-family-wellbeing/family-matters/>

¹⁸ Royal Commission into Institutional Responses to Child Sexual Abuse, Final Report, Contemporary out-of-home care, https://www.childabuseroyalcommission.gov.au/sites/default/files/final_report_-_volume_12_contemporary_out-of-home_care.pdf

¹⁹ SNAICC. (2023). Family Matters. SNAICC – National Voice for Our Children. <https://www.snaicc.org.au/our-work/child-and-family-wellbeing/family-matters/>

‘flip the script on the imposition of services on Aboriginal community that were part of the colonisation process’.

Case study - Arnajum Aboriginal Medical Service - Family Healing program

Due to the fact that approximately 60% of women return the abuser due to the ongoing cycle, the service works with all parties involved including Police, Courts, as well as the family unit to ensure that the children are protected. Perpetrator has to leave until he's undertaken parenting courses and rehabilitation. The program is focused around the woman's needs.

Intersection of targets – Women in Custody

Programs targeted towards women in custody can have an impactful difference due to the opportunity to provide intensive support while a victim-survivor is in custody and to address cycles of re-offending. Although women make up a relatively small proportion of the total prison population in Australia, over the past 10 years the number of women in prison has been increasing and at a faster rate than the number of men in prison.

Aboriginal and Torres Strait Islander prisoners accounted for a third (33%) of the total female prisoner population. Indigenous women were imprisoned at a much higher rate than non-Indigenous women (453 and 24 per 100,000 adult female population, respectively).²⁰

The close links between imprisonment and domestic and family violence (DFV) and sexual violence are poorly understood but are crucial in addressing cycles of violence/imprisonment, and providing support services to women who have experienced both violence and imprisonment. Women in prison are more likely to have a history of physical and sexual abuse than men; are more likely to have mental health problems; and experience drug and alcohol dependence at higher rates than men.²¹

High numbers of women in custody have experienced abuse - around 70–90 percent²². Women can become caught in cycles of imprisonment and experiencing violence: violence increases the risk and effects of imprisonment, and imprisonment increases the risk and effects of violence.²³

Numerous case studies are shared below presenting programs which deliver meaningful results. State and Federal Governments should consider investing to fund expansion of these programs.

Corrections agencies need to be held accountable in facilitating intensive support for people transitioning out of custody into the community to address recidivism. There is also a need to terminate the privatisation of correctional centres due to the ethical issues that arise from the conflict of interest of the profit motive being prioritised over inmate wellbeing and rehabilitation. We support the NSW Government's policy of reversing the failed prison for profit model by reversing the privatisation of correctional facilities and decision to not renew a contract with US multinational GEO Group for Junee Correctional Centre²⁴ when it runs out

²⁰ Australian Institute of Health and Welfare 2020. The health and welfare of women in Australia's prisons. Cat. no. PHE 281. Canberra: AIHW.

²¹ WHO 2014. Prisons and health. Copenhagen: World Health Organization Regional Office for Europe.

²² Bevis, M., Atkinson, J., McCarthy, L., & Sweet, M. (2020). Kungas' trauma experiences and effects on behaviour in Central Australia (Research report, 03/2020). Sydney, NSW: ANROWS

²³ ANROWS report

²⁴ <https://www.theguardian.com/australia-news/2023/nov/03/nsw-correctional-facility-prisons-privatisation-reversal-junee-parklea>

in 2025, and ending the contract with MTC Australia for the management of Parklea Correctional Centre in 2026.²⁵

Recommendation 6: Governments needs to prioritise funding programs for women in custody to address the poorly understood overlap between imprisonment and domestic and family violence and sexual violence (DFSV). There is a need to recognise the importance of continuity of services, case management, pre-release planning and throughcare for women in custody, as well as to develop and fund culturally relevant diversionary initiatives such as The Glenn for Women and Kamira rehabilitation centre.

1. There is an urgent need for consistent targeted programs to be delivered to people in custody. We recommend increasing and redirecting investments into funding culturally appropriate healing and drug and alcohol rehabilitation programs. Programs need to be centred around being trauma informed and focused on healing for women who are DFSV survivors.
2. Targeted trauma-informed and culturally safe programs need to be delivered to women in custody and take into account the proportion of women who are victim-survivors of DFSV, and whose trauma manifests in substance abuse.

Governments need to apply a cost-benefit lens towards the effectiveness of programs. The financial benefits and positive outcomes associated with expanding the capacity of community organisations and Aboriginal-controlled bodies to support people at risk of, or who have experienced, criminal legal system involvement are clear.

AWAN draws attention to the 2012 report, *An economic analysis for Aboriginal and Torres Strait Islander offenders*²⁶ which estimates that diverting individuals to community residential rehabilitation instead of prison generates financial savings of approximately \$111,458 per First Nations person. A more recent 2021 study by researchers at CRC, the Justice Reform Initiative and UNSW showed CRC's work supporting people exiting prison precipitated savings to government of up to \$16 million over three years.²⁷ Additionally, community-based treatment for First Nations peoples is associated with lower mortality rates and an overall improvement in health-related quality of life.

AWAN expresses concern about the Productivity Commission's latest data showing a 15 per cent spike in imprisonment of Indigenous adults in just one year, between 2023 and 2024.²⁸ We support CRC's submission that 'by shifting funding away from harmful carceral systems and into culturally appropriate funding alternatives to incarceration (such as cultural rehabilitation services, post-release transitional programs), the Government can begin to

²⁵ <https://www.theguardian.com/australia-news/2025/mar/02/parklea-correctional-centre-to-return-to-public-hands-as-nsw-reverses-failed-prison-for-profit-model>

²⁶ <https://www.indigenousjustice.gov.au/resources/an-economic-analysis-for-aboriginal-and-torres-strait-islander-offenders-prison-vs-residential-treatment/>

²⁷ Sotiri, M, McCausland, R, Reeve, R, Phelan, L and Byrnes, T 2021, "They're there to support you and help you, they're not there to judge you". Breaking the cycle of incarceration, drug use and release: Evaluation of the Community Restorative Centre's AOD and reintegration programs', Community Restorative Centre, viewed 6 March 2025, <https://www.crcnsw.org.au/advocacyresearch/publications/research-and-evaluation/>

²⁸ <https://www.abc.net.au/news/2025-03-12/closing-the-gap-target-progress-for-state-and-territories/105038492>

*work with First Nations people to achieve self-determination. Notably, a self-determining person would not choose to be locked up.*²⁹

Services delivered by programs such as Waminda Health Centre and The Miranda project are not well funded highly demanded due to their ability to provide women with holistic care and deliver complex case management. Rehabilitation services, such as Jarrah House which support women with children are particularly valuable to enable women to address addiction issues while maintaining care of their children.

Models for success case studies

Case study: The Miranda Project

The Miranda Project is delivered by Community Restorative Centre (CRC) and is an innovative, gender specific program working with people who identify as female who are at risk of both domestic violence and criminal justice system involvement. The program begins working with women 3-6 months before they are released and 12 months afterwards. The program is limited to residents in the Liverpool and Penrith area.

The Miranda Project assists vulnerable women attending on court or exiting prison. Miranda aims to halt the increase in the women's prison population through the provision of genuine support and alternative pathways within the community. While it is a mainstream program, Miranda has two specialist First Nations workers and provides holistic support including casework, group activities, access to Victims Counselling and connections with other key services. One of three of the service offices is co-located at Sydney Regional Aboriginal Corporation.

The Glen for women

The Glen's 12-week program offers a culturally safe, supportive environment to recover from addiction and start building practical life skills for clients over 18-years old. The Glen also offers a transition program to support clients achieve their psychosocial goals such as education, employing, finances and housing. The Glen works with individuals on bail and spaces are limited. The Glen treats the person as a whole, beyond addictions by treating triggers that are causing the addictive behaviours and helping find ways to manage them.

Waminda women's health centre

Waminda is a culturally safe and holistic service providing women and their Aboriginal families an opportunity to belong and receive quality health and well-being support, with a key focus on providing tailored strength-based care. The Justice Health supports women who come into contact with the Criminal Justice system and provides supports in community and at four correctional centres including Emu Plains, Dillwynia and Silverwater.

Kamira Alcohol and Other Drug Treatment Services Inc

Kamira provides residential treatment options for women, pregnant women, and women with children who are experiencing problematic alcohol and/or other drug use across New South Wales. The program delivers an all-encompassing, holistic, evidence based and trauma informed treatment program delivered by a team of allied health professionals.

Kamira's model involves the delivery of a 5-7 month program which prioritises First Nations and pregnant women and provides support for supported and transitional housing. The program offers two groups per day - parenting, DV groups, counselling, therapy and circle of

²⁹ Community Resource Centre, Submission for Select Committee on Measuring Outcomes for First Nations Communities, 7 March 2025, <https://www.crcnsw.org.au/wp-content/uploads/2025/03/Measuring-outcomes-for-First-Nations-communities-draft-submission.pdf>

security. Cultural programs are offered including Aboriginal art programs. The service receives inadequate funding and there is a need to expand facilities to older children.

Jarrah House

Jarrah House is an evidenced based therapeutic residential drug and alcohol treatment service for women and women with their children. Mothers who attend Jarrah House with their children also participate in Interactive Parent Therapy including emotional availability and reflective parenting assessments which helps them to integrate the theory they are learning into everyday parenting moments.

Jarrah House offers an evidence-based parenting program informed by Circle of Security, Parents Under Pressure and the work of Dan Siegel's "Whole Brain Child" to encompass the principles of Dialectical Behavioural Therapy (DBT) and the Cognitive Remediation elements of the Jarrah House Program. While at Jarrah House, children are monitored on a regular basis and supported through a structured, child-centred learning environment. Jarrah House promotes the development of the whole child, including social, spiritual, physical and cognitive development. Childcare support and age-specific activities are provided seven days a week by early childhood child care workers.

As a mainstream service, Jarrah House has demonstrated a strong focus on cultural safety by having multiple First Nations Health Worker roles. Each client is assigned a Care Manager and, where culturally appropriate, works in collaboration with the First Nations Health Worker at the beginning of treatment to enable effective service coordination and support during her time in residence and beyond. Programs includes weekly activity with Brolga Dance Academy and IndigiGrow. We are engaged with Na Joomelah and Ngala Nanga Mai, and support women to link up with a wide range of Aboriginal services. At an organisational level, there is also a commitment to reconciliation through an active Reconciliation Action Plan (RAP) Working Group in place.

The degree to which current measurements and targets reflect the strengths of First Nations cultures, as opposed to an emphasis on deficit and lack

The Biomedical deficit modelling is deeply entrenched in western methodology that there is such a limited understanding of what strength-based measurements looks like. As such, traditional evaluation methods have focused on deficits and what is lacking in terms of outcomes rather than recognising community strengths. This approach demoralises communities and neglects the underlying cultural assets of robust kinship systems which created obligations to each other and the environment that existed prior to colonisation.

A conscious effort ought to be made to ensure that data does not dehumanise people and there is a need to have mixed methodology approaches complemented by qualitative research. An AWAN member shared that *'statistics can be manipulated, but you can't manipulate truth telling from individuals'*.

As Professor Chelsea Watego has argued, Closing the Gap targets centre whiteness as the standard to which Aboriginal people are measured, rather than acknowledging the strength, resilience, and sovereignty of First Nations people. The framework does not confront the structures of colonial violence and systemic racism that underpin the disparities it seeks to address. As Watego (2018) writes: "...the discourses of 'Closing the Gap' and 'compliance' which remind us that the Black body is to be regulated and remedied by the health

system."³⁰ Watego goes on to argue that the problem is not Black failure, but the unrelenting imposition of white norms and expectations upon Black lives, which are already thriving in ways that are not recognised by the state.

Recommendation 7: Complement quantitative data with qualitative methods such as community interviews, participatory action research, and case studies. This mixed-methods approach will provide a richer, more accurate picture of DFSV and its ripple effects across communities

Grounding research in First Nations voices is a powerful process in challenging systemic discrimination and advocating for change in the world —envisioning new ways of moving forward. Through centering First Nations stories, we shift away from a focus on metrics or deficit criteria that structure risk assessments. Instead, we foreground narratives of transformation and oppression through the power of Aboriginal women's words.³¹ Stories challenge assumptions, biases and stereotypes that pivot on deficit. Giving voice enables First Nations women's knowledge to provide a counter-narrative of strength, resilience and resistance. This has the power to heal communities, nurture and build relationships, and advocate for the needs, priorities and aspirations of First Nations women, families and communities.

³⁰ Watego, C 2018, Moving Beyond the Frontline: The power and promise of an Indigenous Health Workforce, Indigenous X, [hFps://indigenoux.com.au/moving-beyond-the-frontline-the-power-and-promise-of-an-indigenous-health-workforce/?utm_source=chatgpt.com](https://indigenoux.com.au/moving-beyond-the-frontline-the-power-and-promise-of-an-indigenous-health-workforce/?utm_source=chatgpt.com)

³¹ Behrendt, Larissa. 2019. Stories and Words, Advocacy and Social Justice: Finding Voice for Aboriginal Women in Australia. *Australian Feminist Law Journal* 45: p 205. [[Google Scholar](#)] [[CrossRef](#)]

The possibility of incorporating broad ideas about wellness into measurements, with a view to promoting mental, physical, and spiritual health and wellbeing

Recommendation 8: Embed healing and reconciliation targets into the Closing the Gap targets by actively prioritising action on reconciliation and anti-racism initiatives, including implementing the National Anti-racism framework

The Closing the Gap framework does not confront the structures of colonial violence and systemic racism that underpin the disparities it seeks to address. It is unrealistic to achieve Closing the Gap targets without prioritising healing as a consequence of hundreds of years of intergenerational trauma. The Healing Foundation describes healing as reconnecting with culture, strengthening identity, restoring safe and enduring relationships, and supporting communities to understand the impact that their experiences have had on their behaviour and create change.³²

Social and Emotional wellbeing - Healing to address intergenerational trauma

Social and Emotional Wellbeing are metrics which should be connected to intergenerational trauma and the path to meaningful reconciliation. Self-determination must be the underpinning principle of any action to address all Closing the Gap targets. We call on all state Governments to prioritise treaty negotiations with First Nations peoples. Treaties are necessary to recognise historic wrongs and provide an opportunity to recast the relationship between Indigenous and non-Indigenous people. Australia is one of the few settler-colonial Commonwealth nations not to have a treaty between the state and the First Nations. The Victorian Government is negotiating a treaty with the First Peoples' Assembly of Victoria. This is Australia's first treaty between a state government and First Peoples – this process ought to be implemented by all states and territories.

In 2017, the Uluru Statement from the Heart called for a Makarrata Commission to supervise a process of agreement-making, alongside a process of truth-telling and a constitutionally enshrined First Nations Voice to parliament. The Makarrata Commission would support the negotiation of formal agreements between Aboriginal and Torres Strait Islander peoples and Australian governments at national and regional levels. Treaty should be all encompassing and incorporates Closing the Gap targets as a human rights response.

There is an urgent need to progress self-determination to in the aftermath of the defeat of the Voice to Parliament in October 2023 and address the impact of racism that flowed. An AWAN Member shared that the '*referendum defeat was a wound that that was opened nationally and neglected nationally*', and has been connected to an increase in racism which has not been acknowledged. The divisive and racially charged nature of the campaign has a far-reaching impact, and there is a need to prioritise reconciliation and healing.

There is a need to prioritise address racism and to fully implement the Australian Human Rights Commission recommendations into the National Anti-Racism Framework and to achievement Article 2 of the United Nations Declaration on The Rights of Indigenous Peoples. The Human Rights Commission has called on the Australian Government to lead a

³² Healing Foundation. (2018). *Glossary of healing terms: A guide to key terms related to Aboriginal and Torres Strait Islander healing*. <https://healingfoundation.org.au/resources/glossary-of-healing-terms/>

national response to eliminating racism that begins with truth-telling for First Nations peoples and embeds their right to self-determination.³³

Our members have noted discrepancies in responses and action taken in relation to the recent rise in hate crimes involving other groups and note that this level of attention has not been given to the experiences of racism by First Nations communities.

Australia endorsed the United Nation Declaration on the Rights of Indigenous Peoples (UNDRIP) in 2009, a mechanism that if fully implemented would better protect and progress the human rights of First Nations Peoples. Since then, in international forums, Australia has committed to take actions to implement the Declaration and promote indigenous people's enjoyment of rights on an equal basis. However, there is no legislative commitment to comply with the UNDRIP. The Australian Government has not, however:

- taken steps to implement the UNDRIP into law, policy and practice.
- Negotiated with Indigenous peoples a National Action Plan to implement the UNDRIP
- Audited existing laws, policies and practice for compliance with the UNDRIP.

Recommendation 9: Implement the Australian Human Rights Commission recommendation for Government to develop a national program to implement UNDRIP and schedule it to the definition of human rights in the *Human Rights (Parliamentary Scrutiny) Act 2011* (Cth)

Gender-specific healing programs

Whilst we recommend gender specific programs for both men and women, we note that men are the predominant users of violence against women, and culturally appropriate men's behaviour change programs should be funded adequately.

Consultations with Aboriginal men called for Aboriginal led behaviour change programs due to the lack of cultural safety for programs delivered by mainstream organisations. Users of violence should be encouraged to undertake the program, preferably before escalation and without prejudice. Essential elements of programs that work with Aboriginal and Torres Strait Islander men and communities on issues relating to family violence include³⁴:

- common objectives of engaging men on social and emotional issues, supporting empowerment and facilitating healing;
- the need for community "buy-in" and ownership of all aspects of program design, implementation and evaluation;
- supporting healing to address the consequences of trauma and grief, including encouraging men to acknowledge their actions and the effects they have had on their family and community
- a holistic, multidimensional approach
- understanding and fulfilling the cultural needs of participants
- program structure as typically ongoing, providing an environment for healing that is not time-limited program content, that provides family violence education and skill development, and establishes basic guidelines for expected behaviour.

³³ https://humanrights.gov.au/sites/default/files/2024-11/NARF%20Report%20Summary%202024_6pp_DIG_ACCESS.pdf

³⁴ Carlson, B., Day, M., & Farrelly, T. (2021). *What works? Exploring the literature on Aboriginal and Torres Strait Islander healing programs that respond to family violence* (Research report, 01/2021). ANROWS.

Case study: Marrin Weejali's Better Man program

Marrin Weejali's Better Man program has been identified as successful men's domestic violence group to assist men to accept their actions and change the way they express themselves. The Better Man program is defined by taking an educational, relational and long term approach to men's change behaviour programs and tailoring services to meet the cultural needs of clients.

By participating in the Better Man program, men are able to access more holistic programs to address the root causes of violence by accessing programs such as the Men's Health Yarn Up Group, a cultural and spiritual healing group for men to become stronger role models for their families and community as well as the Social & Emotional Wellbeing Group.

The key features underpinning the success of the program includes opportunities for reflection, taking a whole person approach to men's change behaviour, cultural safety and focus upon accountability. The unique 'homegrown' workforce is a key component to the success of the programs, as there is a focus on recruiting staff with lived experience who can demonstrate both empathy as well as foster accountability.

Despite the success of the program and the fact that it is well sought out for referrals by courts, community and corrections, the program doesn't fit into the Men's Change Behaviour program model. This limits the ability for a culturally safe program to be offered across more locations in NSW.

The incorporation of alternative measurements as a complement to existing measurements

Wellness in First Nations contexts is multifaceted, embracing mental, physical, spiritual, social and communal dimensions. However, the current measurement frameworks do not consider these holistic aspects, particularly in relation to the impact of DFSV³⁵.

As acknowledged by the Commonwealth Government's Measuring What Matters Wellbeing Framework, whole of population indicators are not an accurate measure of First Nations wellbeing as they are limited in their ability to represent these intrinsic cultural differences or acknowledge the past practices that have had detrimental impacts³⁶.

Recommendation 10: Develop Comprehensive Wellness Indicators to complement the Australian Government's National Wellbeing framework

We support the First Nations Advocates Against Family Violence's recommendation³⁷ to create integrated indicators that capture the mental, physical, social and emotional and spiritual dimensions of wellbeing. These should include measures of cultural connectedness, community support networks, and investing in self-determined solutions, including initiatives that can enhance protective factors and address intergenerational trauma. For example, connection and cultural engagement, incorporating traditional healing practices as well as access to culturally safe support services for parenting, early intervention and prevention.

³⁵ First Nations Advocates Against Family Violence, The First Nations Advocates Against Family Violence submission to the Select Committee on Measuring Outcomes for First Nations Communities, 15.

³⁶ Measuring What Matters, https://treasury.gov.au/sites/default/files/2023-07/measuring-what-matters-statement020230721_0.pdf, 21 July 2023

³⁷ Ibid

Conclusion

The NSW Aboriginal Women's Advisory Network again thanks the Select Committee on Measuring Outcomes for First Nations Communities for the opportunity to provide our written feedback to complement our attendance at the Sydney hearing on 19 February 2025.

If the Select Committee has any questions about this feedback, or wishes to speak to us further, please contact the NSW Aboriginal Women's Advisory Network's Policy and Advocacy Officer, Yusra Metwally by email: y.metwally@awan.org.au or on 0436 326 427.

Yours Sincerely,

Shaquille Robinson

Shaquille Robinson
Acting Program Co-ordinator
NSW Aboriginal Women's Advisory Network

