MARAM
Practice Guides

Responsibility 8: Comprehensive Risk Management and Safety Planning
In this document, ‘Aboriginal’ refers to both Aboriginal and Torres Strait Islander people.

The Victorian Government proudly acknowledges Victorian Aboriginal people as the first peoples and Traditional Owners and custodians of the land and water on which we rely. We acknowledge and respect that Aboriginal communities are steeped in traditions and customs built on an incredibly disciplined social and cultural order. The social and cultural order has sustained up to 50,000 years of existence. We acknowledge the ongoing leadership role of the Aboriginal community in addressing, and preventing family violence and join with our First Peoples to eliminate family violence from all communities.


## Contents

**Responsibility 8: Comprehensive Risk Management and Safety Planning**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1 Overview</td>
<td>4</td>
</tr>
<tr>
<td>8.2 Developing a Comprehensive Risk Management Strategy with the Victim Survivor</td>
<td>5</td>
</tr>
<tr>
<td>8.3 Risk Management when Initial Contact is Limited</td>
<td>9</td>
</tr>
<tr>
<td>8.4 Risk Management for Post-separation Violence or Where no Separation is Planned</td>
<td>9</td>
</tr>
<tr>
<td>8.5 Risk Management for a Victim Survivor who is not Ready to Engage</td>
<td>11</td>
</tr>
<tr>
<td>8.6 Risk Management for a Victim Survivor who is not Ready for Assistance</td>
<td>12</td>
</tr>
<tr>
<td>8.7 Safety Plans</td>
<td>13</td>
</tr>
<tr>
<td>8.8 Justice System</td>
<td>17</td>
</tr>
<tr>
<td>8.9 Safety Plans for Children and Young People</td>
<td>23</td>
</tr>
<tr>
<td>8.10 Risk Management for an Adolescent who is Using Family Violence</td>
<td>27</td>
</tr>
<tr>
<td>8.11 Managing Risk Across the Community with an Intersectional Lens</td>
<td>27</td>
</tr>
<tr>
<td>8.12 Risk Management Considerations for Aboriginal Victim Survivors</td>
<td>28</td>
</tr>
<tr>
<td>8.13 Risk Management Considerations for Diverse Communities and At-risk Age Groups</td>
<td>28</td>
</tr>
<tr>
<td>8.14 What’s Next?</td>
<td>31</td>
</tr>
</tbody>
</table>

**Appendix 14: Comprehensive Safety Plan Template (Adult)**

**Appendix 15: Ecomap Diagram Template**

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**Note:**

Guidance and learning objectives for working with perpetrators is in development and will be available late 2019/early 2020. Finalised guidance will make clear that only key/selected professionals and services will be trained/required to provide a service response to perpetrators related to their use of violence.

The learning objective for this **Responsibility 8** will include:

Ensure staff who specialise in working with perpetrators are trained to undertake comprehensive risk management through development, monitoring and actioning of risk management plans (including information sharing); monitoring across the service system (including justice systems); and actions to hold perpetrators accountable for their actions. This can be through formal and informal system accountability mechanisms that support perpetrators’ personal accountability to accept responsibility for their actions, and work at the behaviour change process.
Responsibility 8: Comprehensive Risk Management and Safety Planning

8.1 Overview

This guide should be used when family violence has been established and a comprehensive risk assessment has been completed for an adult, child or young person.

This guide will assist specialist family violence practitioners to apply their advanced skills in working effectively with victim survivors, including acting to respond to the outcomes of comprehensive risk assessment and undertake comprehensive risk management, safety planning and case management.

Key Capabilities

Professionals required to have knowledge of Responsibility 8, should be able to:

- Understand and apply all guidance on each of the previous responsibilities
- Confidently and competently plan and undertake a range of risk management activities with victim survivors (adults, children and young people)
- Actively monitor family violence risk and respond to changes in risk levels through adjusting risk management activities and safety plans
- Proactively share and gather information on family violence risk including building a shared understanding of a person’s family violence risk with other support agencies.

Specialist practitioners who use this guide should also be familiar with the Foundation Knowledge Guide, Responsibilities 1–7, and continue to Responsibilities 9–10.

Comprehensive risk management is the process of responding to identified family violence risk. It includes developing, monitoring and actioning safety plans and risk management activities with victim survivors (adults, children and young people). It also includes a focus on ongoing review and assessment (see also Responsibility 9) to respond to the dynamic nature of risk, and collaborative information sharing to understand risk/s from the perpetrator.

This chapter builds on the guidance on safety planning and identifying protective factors in Responsibility 4, with additional risk management guidance relating to:

- Safety planning in an emergency, in the home, when not ready to leave, when leaving and post separation
- Engaging with the justice system
- Providing appropriate risk management for Aboriginal people, or people who identify as belonging to a diverse community
- Providing appropriate risk management for children and young people.

Risk management is the focussing of responsibility for the risk on the perpetrator’s behaviour and supporting the victim survivor in the development of actions that may reduce harm, or in some circumstances to remove themselves from harm.

A central part of risk management is also providing a proactive response to remove or reduce threat of future harm posed by the perpetrator. Responses may be initiated by interventions of a range of services, including police or courts, and can include referral options and criminal and civil responses. The aim of responses is to reduce risk and provide support for stabilisation.
and recovery. This can be accomplished through responding to address safety issues and building and reinforcing protective factors.

8.2 Developing a Comprehensive Risk Management Strategy with the Victim Survivor

The risk management process should respond appropriately to the assessed level of risk, the form of violence that is occurring, as well as likelihood/timing of risk.

An important part of safety planning and risk management is to work with the victim survivor to understand practical and structural barriers they face and to increase protective factors. You should use professional judgement and work in partnership with the victim survivor to maximise safety in ways that are collaborative, supportive and appropriate to the level of risk.

In developing a risk management plan your discussion with the victim survivor may include:

- Talking about their experience of risk and centring responsibility for the risk and its impacts on the perpetrator’s behaviour
- Exploring the victim survivor’s self-assessment of risk posed by the perpetrator and protective factors (such as through the ecomap exercises as a discussion aide)
- Considering each child or young person and weighing the risk from the perpetrator, the impact of the abuse, and the protective factors in place for each individual child/young person, in how you plan for each individual and the family as a whole
- Responding to your determination of the level of risk and specifically action planning for key risk factors that have been identified as increasing the likelihood of the victim survivor being killed or being seriously harmed by the perpetrator, such as high-risk factors which have changed or increased in severity or frequency which indicate escalation of risk
- Exploring the risk management strategies the victim survivor has already tried. Identify those that continue to work and which ones are no longer helpful or need to be changed to meet current circumstances
- Asking about the victim survivor’s experiences in engaging with services to date, and what organisations/types of services have been involved (police, health, housing, immigration, legal organisations, schools etc.)
- Exploring practical and other needs that may impact on their safety planning and ability to remain safe. These may be housing, health, education needs, children’s needs, employment, finances, relationships with family and friends, pets, and/or the potential loss of community
- Exploring the victim survivor’s experience of violence caused by the perpetrator, or other historic trauma, and what barriers have affected their ability to leave the relationship (if they wish to do so)
- Understanding the victim survivor’s strengths, needs and goals to support their safety and recovery, and their child/ren, in the week/month/year ahead
- Exploring the perpetrator’s involvement with the service system and identifying areas that may hold information relevant to risk management. This could be done through undertaking the ecomap activity described in Section 8.2.1 and applying it to what is known about the perpetrator’s engagement with services and community.

Working with the victim survivor to increase protective factors should include the following considerations and a discussion of possible options (see introduction to protective factors in Responsibility 3).
### Table 1: Protective Factors and Risk Management — Areas for Discussion

<table>
<thead>
<tr>
<th>Protective factor domains</th>
<th>Factors</th>
<th>Areas to cover</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Systems intervention</strong></td>
<td>Legal issues</td>
<td>Discuss legal needs and legal assistance which can contribute to improved safety and security including intervention orders, parole conditions and options.</td>
</tr>
<tr>
<td><strong>Practical/environmental</strong></td>
<td>Safe housing</td>
<td>The type of accommodation the victim survivor has and its location may be important determinants of safety for adults, children and young people. Discuss the accommodation required to keep victim survivors safe. This includes immediate (e.g. emergency) and long-term accommodation.</td>
</tr>
<tr>
<td><strong>Financial security</strong></td>
<td>(access to money, employment or education)</td>
<td>Income and financial security can act as barriers to leaving the relationship and/or long-term recovery. Discuss current income arrangements, income support required, and explore other sources of funds, and resources. If the victim survivor is employed, discuss whether they feel safe at work (from the perpetrator), whether their employer and co-workers are aware of the family violence and if they understand the dangerousness of the perpetrator, and or are able to provide some support. Discuss how family violence can affect the victim survivor’s work. Ask whether the perpetrator has ever threatened co-workers.</td>
</tr>
<tr>
<td><strong>Health (including mental health)</strong></td>
<td></td>
<td>Discuss any health concerns related to physical injuries, chronic illness, general medical issues and mental health issues for all members of the family. Explore whether they have been able to access health services independently, and whether they require assistance to contact services.</td>
</tr>
<tr>
<td><strong>Immigration issues</strong></td>
<td></td>
<td>Discuss any immigration issues. Clarify the immigration status of all family members and any additional risks this may pose.</td>
</tr>
<tr>
<td><strong>Food security</strong></td>
<td></td>
<td>Make sure that the family has sufficient food and that food security is not being compromised due to financial security issues.</td>
</tr>
<tr>
<td><strong>Transport</strong></td>
<td></td>
<td>It is important that victim survivors consider their safety in transport/travel. Discuss with the adult victim survivor their access to transport and explore ways of enhancing safety. With older children and young people who may travel independently, discuss ways they can stay safe.</td>
</tr>
<tr>
<td>Telecommunication safety</td>
<td>It is important that victim survivors understand how technologies can be used by the perpetrator to increase risk, and other technologies available that may provide protection. Discuss with victim survivors what steps they can take to ‘stay safe technologically’.</td>
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<tr>
<td>Connection/sense of belonging to community and access to community</td>
<td>Many victim survivors have been isolated by the perpetrator and lack access to any social, familial or community support/social networks. Discuss the relationship (if any) of the perpetrator with extended family members and friends, and whether the perpetrator has ever threatened them. Discuss the social network of children and young people and consider ways to keep them connected socially while staying safe. Explore whether the victim survivor is connected or can re-connect with extended family members, friends, community and/or social networks. If there are children/young people in the family, engagement with school is protective. Discuss where they attend school, kindergarten or childcare and plan for ways to continue engagement and keep children and adult victim survivors safe in these spaces. Identify key support people to call on in an emergency.</td>
<td></td>
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<tr>
<td>Connection to advocacy/professional/therapeutic services</td>
<td>Discuss referral options with the victim survivor and make referrals as appropriate to meet safety and recovery needs of all members of the family, including children and young people.</td>
<td></td>
</tr>
<tr>
<td>Positive and friendly care environment (particularly for children and young people)</td>
<td>Structure, routine, predictability and open communication contribute to a care environment that supports resilience and recovery. Discuss with the victim survivor in what ways they have stability in their environment or what the opportunities are to establish stability. Discuss the capacity for children and young people to be engaged in educational opportunities including safe access to educational facilities without the perpetrator breaching intervention orders by approaching them at school.</td>
<td></td>
</tr>
<tr>
<td>Strengths-based</td>
<td>Culture and identity</td>
<td>It is important to discuss with victim survivors how their Aboriginal identity or other cultural identity is valued, affirmed, and respected and whether they have opportunities to learn about, express and live</td>
</tr>
</tbody>
</table>
out their Aboriginal or cultural identity and maintain connections with their culture.
Discuss whether, for example, identity is respected and affirmed within their family or the community.

| An individual’s personal skills and emotional resilience | Discuss with the victim survivor their strengths and acknowledge their efforts in staying safe. Explore what their coping strategies have been and what supports they may need for longer term recovery. |
| Planning for intervention that may increase risk | Any intervention with the perpetrator can increase risk. Violence often escalates once a perpetrator’s use of violence becomes known to others. This may be a perpetrator reacting/responding to an intervention that has changed the power and control dynamic. This could be either as retaliation or an effort to regain control. An effective response to family violence should anticipate an escalation of the perpetrator’s violence in safety plans and risk management strategies. Discuss this with the victim survivor. |

### 8.2.1 Using an ecomap to explore protective factors

Ecomaps are used to understand an individual’s and/or family’s connections and can provide important information. You may wish to use an ecomap to better understand the victim survivor’s (adults, children and young people) circumstances. By understanding connectivity to protective factors, you can better assist with safety, risk management and recovery planning.

An ecomap template is available at **Appendix 15**. Ecomaps can be used in conjunction with genograms.

Developing an ecomap with a victim survivor can support the consideration of protective factors and other circumstances.

An ecomap is useful for identifying social and personal relationships of a victim survivor with their environment. The ecomap is a visual tool designed to help the victim survivor identify supports. These supports may have not been identified in the past and may contribute as a protective factor to lessen the victim survivor’s risk of further harm from the perpetrator.

Once the services and community that support a victim survivor have been identified, outline how to further collaborate with those services to manage risk and also identify any gaps where you can then increase supports. It can also be useful to establish if the perpetrator is also accessing these services, supports and community, as you would then need to manage and safety plan around this risk.

Unpack the perpetrator’s behaviours with the victim survivor and then use the tool to consider any issues that may contribute to managing risk and developing a safety plan. A practitioner may then identify a service or organisation that could provide information to enhance a safety plan or risk management strategy for the victim survivor. For example, if you have identified the victim survivor has an intervention order but are unsure if this has been served on the
perpetrator. You can then use the information sharing scheme (if authorised) to request an update from the police on the current status of the intervention order.

8.3 Risk Management when Initial Contact is Limited

Initial contact with a victim survivor may be brief. However, there may still be opportunities for risk management during a short initial interaction.

If you believe a victim survivor is in immediate danger, the first responsibility is to try to ensure their safety. You may decide to:

- Call the police — (ideally with victim survivor’s permission)
- Call an ambulance
- Arrange emergency support and assistance.

You could request or share information as authorised under the Family Violence Information Sharing Scheme, Child Information Sharing Scheme, or other relevant authorisation, about a perpetrator to support intervention and risk management.

Provide the victim survivor with immediate advice to increase their safety (e.g. information on how to escape a dangerous situation). If the victim survivor is not in immediate danger from the perpetrator, you may undertake a more detailed risk assessment and management, including safety planning. This can occur over the phone, or you could arrange a face-to-face meeting at the office, or a convenient and safe location.

8.4 Risk Management for Post-separation Violence or Where no Separation is Planned

The risk management plan will vary depending on whether the victim survivor has already separated, is planning a separation and/or is experiencing post-separation violence. The advice in this section is also relevant where the relationship or co-habitation is otherwise ceasing, or if this is not planned, in non-intimate partner family violence situations.

Consider the role of the formal system (police, courts, housing, family violence practitioners, children and youth workers, lawyers, drug and alcohol workers and specialist workers in relation to diversity issues).

If the victim survivor is planning to separate/cease the relationship in the future, risk management requires a thorough process of preparation so that they can leave safely. Plan how to manage the other compounding risks and needs, the risks to any children, other dependents, and risks from the perpetrator, such as access to finances.

Risk management and safety planning when the victim survivor does not wish to separate/cease a relationship may be more complicated and will need more careful planning, particularly in relation to how the perpetrator will be engaged or managed (or not). Areas that should be covered in your engagement approach are outlined below.

Table 2: Engagement approach if the victim survivor does not wish to separate

<table>
<thead>
<tr>
<th>Engagement approach</th>
<th>Areas to cover</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respect the decision</td>
<td>Maintain a person-centred approach and accept the decision. If you have determined that a serious risk level is present and the victim survivor requires immediate protection, consider discussing what interventions may be required, including if there are children/young people or other dependents at risk.</td>
</tr>
<tr>
<td><strong>Honest engagement</strong></td>
<td>Provide information and guidance on the range of risk factors present and seriousness of risk assessed to ensure the victim survivor is well-informed in their decision making.</td>
</tr>
<tr>
<td>----------------------</td>
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</tr>
<tr>
<td><strong>Support choices</strong></td>
<td>Be clear about potential consequences of choices, such as escalation of violence from a perpetrator, and avoid expressing frustration at decisions you may not agree with. Encourage engagement and identify protective factors.</td>
</tr>
<tr>
<td><strong>Expectations management</strong></td>
<td>Provide information and advice which manages expectations of what your service is able to provide and how it works with other services and authorities to manage risk posed by the perpetrator.</td>
</tr>
</tbody>
</table>
| **Understand the context of the decision and barriers to leaving** | Explore the reasons that the victim survivor is committed to the relationship. Some victim survivors experience significant barriers to leaving due to a range of supports that they may receive from a perpetrator, and are seeking support for the violence to stop, rather than leave the relationship. Other barriers may relate to one or more protective factors (see Table 1) which you may be able to work with the victim survivor to address. Reasons may relate to:  
  • Heightened fear of escalation of violence from the perpetrator if they leave. This is a serious risk factor and should be taken seriously. Risk management and safety planning should be thorough in how it responds to this.  
  • The victim survivor may believe they are responsible for violence — this needs to be addressed and responsibility placed with the perpetrator.  
  • Fear of isolation, practical barriers to leaving, fear of loneliness or responsibility for the wellbeing of the perpetrator, or of others not accepting the breaking of relationship commitment — if appropriate, consider introducing ideas about the journey of change which may normalise the idea of leaving and providing information about impacts to children.  
  • Explore options to mitigate barriers that may be preventing a decision to leave. |
| **Understanding communication options and connectedness** | Explore how a victim survivor is communicating with other people or services outside of the relationship, and their connection to community. Understand isolating and engagement factors and build on protective factors. |
| **Identifying if the perpetrator is willing to engage** | If so, provide appropriate referral and consider collaborative risk assessment and management with specialist perpetrator services. |
| **Safety plan** | Develop safety plans with the victim survivor (adults, children and young people) which reflect the assessed level of risk, building from existing protective factors or strengthening these, and responding to barriers identified. |
Welfare checks

Consider if welfare checks can support monitoring of escalation or change in risk, readiness to engage in further planning or responding to other changed circumstances. When considering this option note that unexpected or unrequested welfare checks can escalate risk.

When to intervene (sometimes without informing victim survivor)

Whilst it is always important to consider the views of a victim survivor, this should be balanced with the determined level of risk. Consider the level of risk to the victim survivor and whether this has reached a level where intervention is required, such as ‘serious risk and requires immediate protection’.

**Consider the current or potential harm to child/young person victim survivors** and whether this impacts on your decision to intervene. Statutory requirements may require an intervention in some circumstances.

Where a victim survivor does not want you to intervene, you may still need to do so and can discuss this with them to ensure you are aware the reasons for this and how this informs your assessment and management responses.

You should also weigh the likely outcome and risk that may arise from an intervention and actively plan for the intervention to respond to any potential escalation of violence from the perpetrator.

8.5 Risk Management for a Victim Survivor who is not Ready to Engage

For a range of reasons, some victim survivors may not be ready, or may refuse assistance to address family violence risk. Engagement approaches for responding to this situation are outlined below and can support future engagement and safety.

**Table 3: Supporting a victim survivor who is not ready to engage**

<table>
<thead>
<tr>
<th>Engagement approach</th>
<th>Areas to cover</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Open door</strong></td>
<td>Any form of engagement should be encouraged. Let them know that your service will engage with the victim survivor on their own terms and they can return at any future time.</td>
</tr>
<tr>
<td><strong>Ethical engagement</strong></td>
<td>Approach engagement from an ethical standpoint. Often you can’t ethically intervene without consent or engagement from a victim survivor until a threshold of risk is met (such as serious risk, including serious risk and requires immediate intervention) and/or a child/young person is at risk.</td>
</tr>
<tr>
<td><strong>Collaborative risk assessment or management through other services</strong></td>
<td>Victim survivors may be engaged with a range of services — there is great value in secondary consultation through these services. Consider collaboration with an engaged service to facilitate assessment, management and safety planning through another professional.</td>
</tr>
</tbody>
</table>
If a victim survivor is not ready to engage, risk management of the perpetrator may still be an option. Consider the form and level of risk, and the impact any intervention may have on the victim survivor. Ensure interventions do not increase risk and/or plan to mitigate this.

### Risk management of perpetrator

Consider requesting or sharing information about the perpetrator to understand history and spectrum of presenting risks.

### Risk assessment through information sharing

All opportunities to communicate information and options for assessment and management of risk are interventions and can build readiness to engage further.

In some situations, you may share information about a perpetrator with a victim survivor to manage their safety. Consider how this is done and whether it may increase risk to any person. Also communicate clearly to the victim survivor that the information should only be used to manage their safety and outline risk that may be raised if used inappropriately.

### Communication is intervention

Provide links to resources for self-education, if a victim survivor is not ready to engage directly with a service. This may support future engagement.

### Respond to ‘seeking something’

Some victim survivors may engage and only want limited support, may not be aware of what support is available, or may be seeking information only. This should be responded to with respect for the level of engagement sought and the agency of the victim survivor. Connect victims to the information or assistance they are seeking to support future engagement.

### Responding to barriers to engagement

Some victim survivors may have had negative experiences engaging with some services and statutory services. These can be explored and responded to, supporting future engagement and removing or reducing any potential structural barriers to access or likelihood of future experiences of discrimination.

### 8.6 Risk Management for a Victim Survivor who is not Ready for Assistance

When a victim survivor is assessed as being at elevated risk, serious risk and/or requiring immediate protection, but chooses not to engage in safety planning or to respond to support for risk management, you must make every effort to ensure:

- You have their contact details in case you need to contact them in the future about their safety
- You have advised them how to contact police at ‘000’ and the state-wide crisis services
- You have provided clear information on their current assessed level of risk
- They have a clear understanding of their rights under the law and in relation to their own safety and that of any children/young people involved
- You have explained what a safety plan is and provided the option for developing a plan
- You have documented the risk assessment
• You have provided them with information on appropriate and relevant options for support and counselling.

If you believe the victim survivor is at serious risk and/or requires immediate protection and that the victim survivor and/or their children (where applicable) may be seriously harmed by the perpetrator, you should inform the police or other relevant authorities. The consent of the victim survivor is not required in this instance, but you should make every effort to encourage them to plan for ways to increase their and any children’s safety, and to explain your concerns, role and responsibilities.

In some circumstances the rights and/or agency of children/young people may be compromised. It is important to keep sight of and represent the needs of children and young people as victim survivors in their own right, including when engaging with adult victim survivors.

8.7 Safety Plans

A Comprehensive Safety Plan template is in Appendix 14. This plan builds on the Intermediate Safety Plan (adult) template and includes capacity to risk manage individual risk factors, identify interventions, assign actions and coordinate/collaborate with other professionals and services.

Safety planning involves discussing with a victim survivor what actions you can take or coordinate with other services to manage risk from the perpetrator and meet their needs. Plans should be documented, and identify actions, individuals and organisations responsible, and timelines. Safety plans require regular review and updates based on ongoing risk assessment.

Safety plans are developed in partnership with the victim survivor. Responsibilities for actions are shared between the victim survivor, the specialist family violence practitioner (case manager), and a range of other professionals that have a role to provide services or interventions.

The safety plan should be documented and all parties to the plan should have a copy. If it is unsafe for the victim survivor to keep a copy at home, consider an alternative place for them to keep the safety plan.

The following sections cover safety planning for an emergency, safety in the home and leaving the home. Areas that may require more in-depth planning are discussed in more detail, including access to money and financial security, intervention orders, technology safety, transport and route options, and informing people and organisations about the violence.

8.7.1 Safety planning for an emergency

Discuss the importance of emergency planning with the victim survivor, including what they and their children will do, and where they will go in case of an immediate danger. The safety plan may include the following:

• Pre-programme their phone with emergency number(s). Discuss when and how they would call police, including discussing alternatives if they can’t use their phone because of the perpetrator’s actions (such as breaking or tracking a phone)
• Set up an alert system (e.g. code or signal) for neighbours, children, family, or friends so that they know when to call police
• Plan what to do in an emergency with the child/ren and young people, either as their own safety plan and/or as part of the adult victim survivor’s plan
• Identify a safe place for the victim survivor to go if in danger, and how to get there. The victim survivor may go to the house of a neighbour, friend, or family member with the children, or send the children to these places.

• If the victim survivor is living with the perpetrator, identify a space in the house that is lowest risk that they can move to where they may be able to prevent the perpetrator from accessing and can phone police for assistance, and which may afford an escape option.

• Identify a friend, family member or neighbour who can assist in an emergency, and how to make a plan with them to be a contact point.

• Let neighbours, co-workers and others know about the situation and what to do if the perpetrator arrives at the residence.

• Prepare a bag with key belongings — extra sets of car and house keys, clothes, essential items including medication and prescriptions.

• Store valuables and important documents (or copies) in a safe place (e.g. at the home of a family member or friend).

• Keep a copy of any intervention order at hand to show to police.

• Consider alternative communication methods if victim survivors don’t have mobile phones or access to other technology (e.g. if connectivity is an issue or accessibility technology is required), and practice memorising phone numbers. Consider if a mobile phone can be provided for use in an emergency.

• Any mobile app or website with external communication could be useful as a tool in an emergency (for example, LGBTIQ victim survivors may use apps such as Grindr to get emergency support).

8.7.2 Safety in the family home

Discuss options for increasing the safety of the property if the victim survivor has separated from or is not living with the perpetrator and is staying in the family home.

These may include:

• Applying for a family violence intervention order to prevent the perpetrator from coming near the family home or places frequented by the victim survivor (adults, children and young people), including schools and childcare centres.

• Speaking to the landlord (if applicable) about security enhancements and/or changing the lease agreement.

• Changing locks to external doors, installing locks on selected internal doors, installing security chains and deadbolts, installing window locks.

• Installing security systems including alarms, lighting systems, and CCTV, and monitored alarm systems, at home and on a mobile.

• Repairing any damage to doors or windows, installing security screens on doors.

• Increasing the visibility in the front and back yards of the family home.

• Obtaining legal advice if the house is owned by the perpetrator or owned by the victim survivor and perpetrator.

8.7.3 Leaving the family home

If the victim survivor leaves the family home, they and their children may require assistance to find alternative accommodation. The type and location of accommodation will depend on the level of risk, the location of their family, friends and support services, and the connections they have with work and community (including the children’s schools).
You should discuss whether it is safe to tell the perpetrator that they are leaving as doing so can increase risk. Discuss when might be a safe time to leave. For example, when the perpetrator is not at the family home, is at work, or away, or when the victim survivor has to leave the family home for a reason perceived as ‘legitimate’ by the perpetrator, such as picking the children up from school, going to a medical appointment, or going to work.

The safety plan may require the following:

- Planning the departure, identifying items to take, organising police presence during the move, storage arrangements, removalists, child minding etc
- Assisting the victim survivor to access emergency and/or refuge accommodation in the short term (if required)
- Technological safety such as ensuring location settings are not active/potentially replacing a phone and having a car screened for tracking devices
- Assisting the victim survivor to live with family members or friends in the short term
- Ensure the victim survivor has key identity and financial documents (or copies of) including proof of relationship documents for victim survivors who may face immigration issues
- Assistance to obtain a new property, including application for housing, and/or provision of rental assistance. Connection to tenancy advice and advocacy support
- Assisting with relocation costs such as material aid, transport, storage
- Applying for a family violence intervention order
- Discuss further safety planning if there is a risk from extended family, identified third parties at risk or community members. This may be a particular risk for Aboriginal victim survivors, and victim survivors from culturally, linguistically diverse and faith communities
- Additionally, where there is an identified threat to any third person (including if they are not within the family, but their risk is related to the family violence occurring), the third person should be notified they are assessed as at risk and they should have their safety managed.

**8.7.4 Access to money and financial security**

Discussing access to money is an essential part of risk management and safety planning.

The safety plan may require the following:

- Identifying ways the victim survivor can access money in an emergency. This may include ensuring access to assets such as valuable jewellery
- Support or information to enable them to remain connected to current employment or education
- Referring the victim survivor to financial and legal services to explore options
- Securing documentation (or copies of) which may be required to establish a financial ‘identity’ such as birth certificates, passports, and other legal documents
- Setting up or changing access to banking arrangements
- Assisting the victim survivor with:
  - Applying for income support with Centrelink, if eligible
  - Information on obtaining child support from the perpetrator
  - Obtaining concessions for utilities and other costs as appropriate
  - Access to material aid and emergency relief
  - Accessing compensation through Victims of Crime Assistance Tribunal, if eligible
  - Accessing compensation through Workcover, Victims of Crime, TAC, Medicare, or insurance policies, if eligible.
• Advocating, as required, to obtain low-cost health services (e.g. bulk billing, mental health plan)
• Financial counsellors can provide support to access resources, applicable hardship policies and information in response to family violence, such as financial abuse and the impacts of separation and planning around financial instability.

### 8.7.5 Technological safety

It is important to inform the victim survivor their use of technologies can be exploited by the perpetrator to increase risk.

Discuss with victim survivors what steps they can take to ‘stay safe technologically’.

These may include:

• Acting normally if the victim survivor believes their device/s have been accessed by the perpetrator until technology safety can be re-established
• Using computers or devices unknown to the perpetrator (e.g. in a public library or community centre/service) which can reduce the risk of perpetrators knowing the victim’s whereabouts, and other personal information
• Obtaining/using new devices if a perpetrator has accessed an old device and this has been used to track or monitor the victim survivor
• Creating a new email and/or Facebook account which is unknown to the perpetrator and use an anonymous username. Use strict privacy settings on new social media accounts, without identifying public photos
• Accessing devices which send emergency messages, and/or which record events (e.g. if approached by a perpetrator or have the ability to screen-shot messages that can be saved to a file hidden under another app). Devices include BSafe, SafeTcard
• Turning off their mobile when not in use, disabling location services, acquiring a new or additional mobile, and using landlines where possible. Children and young people’s devices should also be considered
• Checking for spyware. Some signs of spyware may include slow battery, programs operating in the background, slower speeds, or the perpetrator knowing more about communication or movements than the victim survivor is sharing
• Using phones in a way that does not show ‘numbers called’ on the bill and ensure that there is an answering machine to record unwanted or illegal calls by the perpetrator
• Changing/creating passwords and PIN numbers for any protected accounts, e.g. banking. Do not use birth dates, children’s or pets’ names, favourite foods, colours or singers. If you are worried you may forget your new passwords leave a list of them at a safe place, like a trusted family member's home
• Setting up new accounts if they have been irreparably accessed and controlled. Always log out and sign off when not using any device
• Checking access to devices and accounts of any children/young people, including school-based apps designed to be assessed/used by all parents/carers, which may be used as a method of tracking an adult or child victim’s movements
• Being selective with future contacts, including on social media, only adding actual friends and removing anyone who may not be trusted not to communicate with the perpetrator.

You can access further information on supports through smartsafe.org.au.
8.7.6 Transport and routines

Explore what access to transport victim survivors have. Discuss with the victim survivor their usual travel routes and routines and explore ways of enhancing safety.

These may include:

- Changing modes of travel
- Always having a charger and mobile phone, and emergency contact numbers ready to dial
- Letting friends, family, or co-workers know where the victim survivor is, and when they expect to arrive home, at work, or other places
- Ensure safe transport of children/young people to and from school, pre-school, or childcare
- Ensure that older children who travel independently can do so safely
- Vary travel routines. For example, not frequenting the same shopping centres and other places or changing how and when you leave home or work, or options for picking up children from childcare arrangements, any other repetitive behaviour that the perpetrator may be aware of.

8.7.7 Informing people and organisations

There may be a number of people and organisations in the lives of victim survivors that need to be aware of the risks posed by the perpetrator. This may include extended family members, friends, neighbours, workmates, people in the community and the children’s school(s). Each individual and organisation need to have a clear understanding of what actions to take if they are contacted by the victim survivor, or if they encounter the perpetrator.

The safety plan may include the following:

- Identify key people and organisations in the lives of the victim survivor and children, who can help support them and increase their safety
- Inform neighbours, extended family members and friends. Clarify expectations and communications
- Inform employers and co-workers, as well as education providers if applicable, about the risk and safety plan information relevant to them around monitoring and support
- Explore options of support that an employer could offer — counselling, pay checks going to a different bank account, family violence leave, flexible working and/or security arrangements
- Provide information to children’s school(s), including a copy of any orders designed to protect the children from the perpetrator, instructions about what to do if the perpetrator comes to pick up or see the children in contravention of the order, a photograph of the perpetrator and description of the car. Discuss not providing information that could increase risk.

8.8 Justice System

When developing risk management strategies with the victim survivor, identify, work with and advocate for effective and timely responses from justice and statutory bodies, including police and courts. This might include:

- Sharing relevant information with police that might assist with investigations and possible criminal charges against a perpetrator
- Advocating for an intervention order to be sought against a perpetrator by police on behalf of a victim survivor (adults, children and young people) and supporting the application process, where possible (refer to Section 8.8.1)
• Sharing relevant perpetrator information with a victim survivor where it is safe to do so. This information might assist them to manage their risk, or that of their child, including assisting in obtaining an intervention order or impact decision making around child living arrangements or other contact arrangements with a perpetrator.

• Referring victim survivors to appropriate support to seek advice regarding Victims of Crime entitlements, or other financial assistance such as enforcements of fines.

• Requesting information from Corrections Victoria to determine if a perpetrator is in prison. Information may include any programs they are undertaking, their release date and assessing what risk management actions will be required to manage family violence risk.

8.8.1 Intervention orders

Intervention orders are a primary risk management strategy, as they provide legal constraints on the behaviour of the perpetrator. Intervention orders can protect a victim survivor’s children (who may also be victim survivors).

Family violence intervention orders (FVIO) are court orders made pursuant to the Family Violence Protection Act 2008 (Vic). A FVIO is a legally enforceable court order that aims to provide protection to protected persons from a family member who is perpetrating family violence.

An application can be made by: police; a victim survivor; any other person with the written consent of an adult victim survivor; a parent of a child victim survivor; a person with written consent of the parent or leave of the court; or the child over 14 years with leave of the court; or if the victim survivor (adult or child) has a guardian, the guardian or any person with leave of the court. In certain circumstance the court may make and order on their own motion for children affected by family violence. This occurs where an order for a parent is not made but the court requires the child be protected.

Types of FVIO include:

• Interim intervention orders: these are temporary orders that can be made before the respondent (the person that the order is against) is served with the application for an intervention order. The interim order does not take effect until the respondent has been served with a copy. The interim order remains in place while the application for an intervention order is before the court, the order remains in force until the court makes another order.

• Final intervention orders: these can be granted by the court if the respondent does not contest the application, or the Magistrate has heard all the evidence presented to the court. They generally expire after 12 months but can be longer.

The National Domestic Violence Order Scheme (NDVOS) allows a family violence intervention order made in one state or territory to be recognised and enforced across Australia. This includes both interim and final intervention orders, family violence safety notices and police intervention orders. For more information please refer to the Magistrates’ Court of Victoria website.

A personal safety intervention order (PSIO) is another alternative which may be more appropriate in some circumstances. A PSIO is an order made by a Magistrate to protect a person from physical or mental harm caused by someone who is not a family member. This can include where a perpetrator is using a third party as a proxy to cause harm to a victim survivor, in relation to new partners or where a victim survivor may choose a PSIO as an alternative, such as where a victim survivor who is from the LGBTIQ community does not want to publicly identify as being in a family-like relationship with the perpetrator.
Discuss with the victim survivor the advantages and possible risks of an intervention order, the available conditions and the urgency of obtaining an order.

There are common fears and misconceptions about intervention orders that you may need to address:

- Explain that taking out an order does not make the perpetrator a criminal, and that they may only face criminal proceedings for breaching the order
- Some victim survivors may fear that an intervention order will damage the perpetrator’s chances of obtaining citizenship or permanent residency
- Older victim survivors with children as perpetrators may be reluctant to ‘get them into trouble’.

Understand and address the victim survivor’s concerns about intervention orders and decide together whether an intervention order is an appropriate risk management strategy.

If the victim survivor wants to make an application, the following steps may be appropriate:

- Discuss with the victim survivor the possible conditions of the order
- Assist a victim survivor to make an application for an intervention order, via a court registrar, the police, or a legal service
- Accompany the victim survivor to court for hearing the application
- Refer the victim survivor to a legal service which can support the application
- Discuss with the victim survivor appropriate support services at court such as specialist family violence practitioners and targeted community supports
- Discuss whether the victim survivor may face pressure to lift the order including possible pressure from extended family/community
- If the victim survivor is facing immigration issues, an intervention order can form evidence to apply for a family violence protection visa. Consult with specialists who have expertise in this area if necessary
- Address any other concerns that may influence the victim survivor’s decisions around making an application.

You may also be supporting a victim survivor who has had the police take out an order on their behalf. In some cases, this may be against the victim survivor’s wishes. The police do not need the consent of the victim survivor if they have fears for their safety. You may need to work with the police and victim survivor to come to an agreement about the conditions and possible actions to protect the victim survivor. For example, the perpetrator may blame and threaten the victim survivor to withdraw an application, and as a safety measure the police can communicate to the perpetrator that they have made the application and not the victim survivor.

8.8.2 Victoria Police

Police have an important role in risk management strategies for victim survivors, including through their engagement with perpetrators. Police responses to family violence incidents are described in the Victoria Police Code of Practice for the Investigation of Family Violence, the Victoria Police Manual and supported by dedicated Family Violence Practice Guides and are prescribed under the Family Violence Protection Act 2008.

When police attend a family violence incident, they may intervene and take a number of actions to immediately manage risk. The following options are available to police in their investigation and response to family violence:
(i) Criminal option — acting under appropriate legislation to bring perpetrators before the
court. An example is arresting a perpetrator for intentionally causing injury pursuant to
section 18 of the Crimes Act 1958, conducting an interview pursuant to section 464 of the
Act and then charging the perpetrator and determining whether bail with conditions is
appropriate according to the Bail Act 1977

(ii) Civil option — acting according to the Family Violence Protection Act 2008. This may mean
seeking an interim intervention order, an intervention order or issuing a family violence
safety notice. Police may make an application to a Magistrates’ Court for an intervention
order on behalf of the affected family member or assist the affected family member in
seeking an appropriate order from the court

(iii) Referral — an option that police follow in all cases. It includes police providing advice and
referring parties to appropriate services who can give necessary support and assistance
as required.

Each of these options is discussed as part of a range of responses below.

Family Violence Response Model1

The model includes a structured frontline response to reports of family violence supported by a
specialist response by Family Violence Investigation Units (FVIU). The FVIU detectives work
closely with other family violence specialist resources including FV analysts for each FVIU and
co-located Family Violence Court Liaison Officers.

Frontline Risk Assessment

The Family Violence Report (FVR), previously referred to as a family violence ‘L17 Form’, is an
evidence-based risk assessment and risk management tool. The questions provide an
objective guide to the risk management, with the highest risk cases being referred to the FVIU.
The Family Violence Report reflects the principles in the MARAM.

The FVR looks at two elements to support case prioritisation of high-risk cases:

• The identification of family violence risk factors, including high-risk factors
• The additional scored component of the tool which enables identification of cases that are
  at an increased risk of repeat family violence between the same two people within 12
  months.

It is important to note that the score, which may note a case as ‘high risk’ based on risk of
repeat family violence alone, does not by itself refer to risk of an affected family member of
being killed or seriously injured. Victoria Police members are trained to also consider high-risk
factors in their prioritisation of cases.

Frontline response

Police attending a family violence incident manage the immediate risk to all parties, including
children. There are a range of criminal and civil options available to police depending on the
nature of the incident. This may include a family violence safety notice (FVSN), family violence
intervention order, or an application and warrant. Steps that can occur following a FVSN or
FVIO include:

• FVSNs generate an application for an intervention order, and last for up to 14 days which is
  usually sufficient time for a court to hear the application
• Perpetrators who are charged may also be excluded by bail conditions
• Police may also arrest and detain the perpetrator for questioning

1 Victoria Police implemented a new Family Violence Response Model (FVRM) in 2019.
• Police may prosecute cases and may make other applications for intervention orders on behalf of a victim survivor and recommend conditions of intervention orders.

If the perpetrator cannot be located following police attendance at a family violence incident, police make arrangements to keep the victim survivor safe. This may involve assisting the victim survivor to obtain support and accompanying victim survivors to emergency accommodation.

Following investigation at an incident, the police also make referrals to specialist family violence services, and other services (e.g. Child FIRST). Referrals by police to community-based organisations are made using the FVR.

**Family Violence Investigation Unit risk assessment and risk management for highest risk cases**

Victoria Police has a structured case prioritisation and response model (CPRM) for family violence investigations providing the FVIUs with a consistent structured process to identify, further assess and frame management of cases where there is the highest likelihood of imminent and severe risk of future harm. The CPRM supports the operationalisation of the principles of the MARAM in a policing context. Both the FVR and the CPRM are important processes to ensure that identified risks are targeted to have the most impact.

The specialist detectives focus on investigation and collaboration in high-risk cases and will develop a proactive risk management plan for the respondent and the affected family member/s (including children).

Frontline resources and FVIUs conduct proactive risk management strategies to improve the safety of the affected family member/s and impact the behaviour of the perpetrator. Management strategies include but are not limited to the targeting of compliance with court-sanctioned conditions, engagement with the victim and the perpetrator, engagement with the FV sector for safety planning and support, and identifying and supporting those identified with accessibility needs or as particularly vulnerable in their interaction with the justice system.

**Sexual Offences and Child Abuse Investigation Team (SOCIT)**

Where sexual offences or child abuse is disclosed in the context of family violence, the matter will be investigated by the local specialist Sexual Offences and Child Abuse Investigation Team (SOCIT).

The mandatory organisation-wide training for the implementation of the FVR will ensure that SOCIT members have an understanding and expertise in family violence risk assessment in addition to their specialist roles in sexual offence investigations.

**8.8.3 Court Services Victoria**

Court Services Victoria incorporates all state court jurisdictions including Children’s Court, Magistrates’ Court, Victorian Civil and Administrative Tribunal, Victims of Crime Assistance Tribunal, Koori Court, County Court, Supreme Court and Coroner’s Court — of which family violence is a large component of cases.

Courts play an important role in the justice system by providing key decisions in accordance with the law to enhance the safety of those experiencing family violence and ensure perpetrators are held accountable for their actions. Therapeutic courts also provide additional services and support, which forms a connection to the broader family violence service sector.

**Victims of Crime Assistance Tribunal:**
The Victims of Crime Assistance Tribunal (VOCAT) is available for victim survivors who, as a result of a violent crime, require financial assistance. The tribunal can provide financial assistance for:

- Counselling and other medical expenses
- Safety-related expenses such as home security
- Funeral costs
- Loss of income
- Special financial assistance
- Distress and dependency.

Koori Court

Koori Court is a court for Aboriginal and Torres Strait Islanders who have taken responsibility and pleaded guilty to a criminal offence. The Koori Court has been developed to reflect cultural issues and operates in a more informal way. The accused must choose to have their case heard in the Koori Court.

Court Support Services

Court Services Victoria provides a range of other services and programs at locations across the State, including:

- Specialist Family Violence Applicant and Respondent Practitioners: Practitioners provide specialist family violence support at court by engaging with a portion of victim survivors and respondents to provide non-legal process related advice, assess immediate safety risks, develop safety plans and make appropriate assessments and referrals to community agencies, Men’s Behaviour Change Program providers and court-mandated counselling services. Located at larger headquarters like Magistrates’ Courts and Melbourne Children’s Courts
- Umalek Balit: A court-based Aboriginal family violence and victim support program, providing culturally safe and relevant service for Aboriginal and Torres Strait Islander families who attend the Melbourne and Mildura Magistrates’ Court for family violence related proceedings within the civil, criminal and Victims of Crime Assistance Tribunal jurisdictions. The service assists with addressing the specific barriers Aboriginal and Torres Strait Islander peoples may face when attending court
- LGBTIQ Applicant and Respondent Practitioners: a service providing tailored responses to the needs of the LGBTIQ communities to support the delivery of a professional, non-discriminatory, accessible response to family violence, prioritising victim survivor safety and perpetrator accountability. Located at the Neighbourhood Justice Centre
- Court Network: provides non-legal support, information and referral to people attending court
- Court Integrated Support Services (CISP) and CISP Remand Outreach Program (CROP) aimed at increasing referral and access to crisis and therapeutic support services
- Assessment and Referral Court (ARC) list: for accused persons who have a mental illness and/or cognitive impairment.

8.8.4 Corrections Victoria

Corrections Victoria provides risk management of family violence perpetrators at a number of stages, including alleged perpetrators on remand, and convicted perpetrators who are incarcerated, or living in the community (e.g. on community-based orders, parole).
Corrections Victoria aims to change the entrenched attitudes of perpetrators, that condone or normalise violence against women and other family members, through internal programs and practices, and by referring men to a Men’s Behaviour Change Program.

While perpetrators are in custody, Corrections Victoria may also monitor behaviours to help ensure that victim survivors are not threatened or abused. Corrections Victoria also has the opportunity to help ensure that perpetrators do not re-offend when released, through setting parole conditions, information sharing and other strategies. Corrections Victoria has an important role in providing information and advice particularly in relation to high-risk and recidivist offenders and attending RAMP meetings.

Once sentenced offenders are assessed by Corrections Victoria for risk of re-offending and areas of criminogenic need, appropriate interventions are designated. Corrections Victoria has developed a number of targeted programs to address family violence offending, in order to reduce the risk of offending while perpetrators are in prison or in the community and reduce the risk of re-offending when prisoners are released.

Corrections Victoria family violence strategy is based on:

- Identifying family violence perpetrators within the Corrections system, assessing their needs, and identifying appropriate strategies. The assessment is based on tools and indicators similar to those used in the MARAM Framework
- Providing targeted programs and services to perpetrators
- Providing support through risk assessment and management planning to prisoners and offenders who are victim survivors
- Changing clients’ attitudes while they are within the Corrections environment
- Working in collaboration with other services.

8.9 Safety Plans for Children and Young People

Much of the information in this section is adapted and refreshed from the Department of Health and Human Services resource Assessing children and young people experiencing family violence.

Safety plans should be tailored to the circumstances and needs of all people in the family experiencing family violence. While children and young people’s safety and wellbeing is linked to the safety and wellbeing of the adult victim survivor (usually the mother), they may also have differing safety and wellbeing needs and, where it is appropriate, may need their own safety plan.

If a safety plan is developed for a child/young person, their parent/carer (usually the mother) should be aware of it. The plan should align with the parent/carer’s safety plan. Ideally, the safety plan should be developed with the support of the parent/carer and can be an opportunity to strengthen the child or young person’s relationship with their parent/carer. Some young people will want an independently developed safety plan.

The development of a safety plan is an opportunity to talk with children and young people about their experience of living with family violence. However, you should engage sensitively, as it may create a heightened sense of anxiety for some children/young people. When a safety plan has been completed, you should allay fears and explore issues that may need to be addressed.

Children and young people will need opportunities to practice and rehearse their safety plan.

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2 Corrections Victoria
Ambivalent feelings that children/young people may have towards the perpetrator (usually but not always their father) may surface during safety planning and may also include confusing feelings about the non-offending parent/carer (usually mother). Safety planning can be an opportunity to explore these feelings.

You should tailor a safety plan to the needs and developmental stage of children and young people. It might include:

- Actions and contact numbers for how to get help safely and quickly
- Identifying trusted people in the child/young person’s network of relationships who can help them
- Ensuring that they have the telephone numbers of trusted adults they can call in an emergency
- Working with the child or young person about how to contact emergency services or a taxi service
- Technological safety — exploring online safety and how to develop skills to safely use the internet and devices safely, including phones
- Exploring how the young person responds when they feel fearful or unsafe (this will include for some young people the actions they could take when spending time with the perpetrator)
- Identifying services that the child or young person might like to access for ongoing help. This could include their local GP, school counsellors, youth centres, a sporting club or other activity that they are connected to or may want to be connected to in the future.

When helping the child or young person develop or rehearse their plan you might ask questions such as:

“What would you do if you were feeling scared?”

“If someone was getting hurt, how would you call the police or an ambulance?”

“Do you sometimes notice that Daddy is getting angry? What are the things that you might do when this happens?”

Safety planning with children and young people may involve you talking about your legal responsibilities to make reports to Child Protection or referrals to Child FIRST, or The Orange Door if required.

You should also explore how children and young people feel and how to act when their parent/carer is being hurt, or when they have been hurt themselves. It is important to provide a number of messages to children and young people. A helpful acronym is SAFE:

- Stay out of the fight
- Ask for help
- Find an adult who will listen
- Everyone knows that it’s not your fault.

If you establish an ongoing relationship with the child or young person, you should discuss their attitudes to the use of abuse and violence in relationships and healthy ways in which people, including children/young people, can act when they do not get what they want or when there is a problem to be solved with another person.

The table below outlines considerations for safety planning with children and young people including guidance for age and stage appropriate approaches.
## Table 4: Considerations for safety planning with children and young people

<table>
<thead>
<tr>
<th>Age</th>
<th>Considerations including developmental factors³</th>
<th>Factors⁴ to consider for children developmental level years 3 to 5:</th>
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</table>
| **Infants and younger children (0–5 years)** | May have their safety plan contained within the adult victim survivor/carer’s plan. When safety planning with young children (3–5 years) you should have the parent/carer present. Affirming to the child that everyone wants them to be safe and they are not to blame are important messages for them to hear and for the parent/carer to deliver. **Practice Tip:** There may be times when a safety plan for a child under the age of 3 is needed. Children at this developmental level should have their parent/carer with them for this discussion. Because the child at this developmental level is often too young to openly discuss the safety plan, incorporate the child’s safety plan into that of their parent/carer. | • They are learning how to express feelings of anger and other emotions in appropriate ways  
• They are concrete thinkers, using experiences and observations to make sense of the world  
• They tend to compartmentalise events  
• They focus on the outcome, rather than the process or rationale that leads to the outcome  
• They think in egocentric ways  
• They develop a sense of being a separate individual and display increased physical independence. |
| **Older children and young people (6–18 years)** | Children and young people should be included in the development of the safety plan wherever possible, including to reflect their views and wishes. The child or young person’s age and developmental stage will influence the 6–11 years of age: Work together with the child to define and understand what family violence is. Affirm that everyone wants the child to be safe. If you are working with both a parent/carer and child or young person, safety planning with children at this developmental level can be more effectively done with the parent/carer present. You can use the template plan with older children and young people of this age. | **Factors to consider for children developmental level years 6 to 11:**  
• They have an increased emotional awareness of themselves and others  
• They are able to think in more complex ways about right and wrong, cause and effect  
• Academic and social success at school has a primary impact on self-concept |

³ Table information adapted from *Safety Planning with Children and Youth: A Toolkit for Working with Children and Youth Exposed to Domestic Violence*, Ministry of Justice, March 2013, British Columbia, Canada.

level of involvement they have in this process. This ensures they understand the purpose of the plan and enables them to feel empowered — providing a direct response to their experience of family violence. It may not be possible to create a safety plan directly with an older child or young person, such as if the child is not present. You can develop safety plans on their behalf by talking with the parent/carer who is not using violence. It also may not be possible to create a safety plan for a child or young person in consultation with a protective parent. In this situation, it is important to still consider the impact of your planning on any parent/carer in their life (who is not using violence).

12–14 years of age:
The full participation of the parent/carer in developing the safety plan may not be needed or desired by the young person. You can suggest they share their safety plan with their parent/carer. You can use the template plan with older children and young people of this age. Another option is to create a simple written agreement with the young person stating what they could do and where they could go if they feel unsafe.

15–18 years of age:
Young people often have a greater ability to keep themselves safe in comparison to younger children but may need help in identifying their own resources and developing a realistic safety plan for themselves. At this developmental level, full participation of parent/carer in safety planning may not be needed or desired. Suggest they present and share their safety plan with their parent/carer. At this age, males especially may feel they can protect their mother by intervening in the violence in some way. While respecting their feelings about this, encourage discussion and highlight that this may put them and their mother at more risk — or talk about the father’s behaviour requiring system intervention and that it is not the child’s responsibility. The safety planning template for either a child and young person or adult can be used, working directly with the young person.

- Peers take on importance as children develop relationships with people outside their families
- They form friendships and start to plan activities for themselves
- They increasingly identify with the same-sex parent and become more aware of differences between males and females in our society
- They are usually able to verbalise what they need to feel safe, can engage in more critical thinking and are often quite creative.

Factors to consider for children developmental level years 12 to 14:
- They have an increased sense of self and autonomy from their family
- They experience physical and emotional changes brought on by puberty
- There is increased peer group influence and a desire for acceptance
- For older youth, dating may raise issues of sexuality, intimacy, and relationship skills
- They have an increased capacity for abstract reasoning and understand a broader worldview
- The media has an increased influence on their lives.

Factors to consider for youth developmental level years 15 to 18:
- They are working towards adult independence
They are able to take an active role in their safety plan. It is empowering for them to create a plan that fits for them personally.

It can be useful to talk about their history of risk-taking, and how they tend to respond in unsafe situations.

8.10 Risk Management for an Adolescent who is Using Family Violence

A holistic and therapeutic response to risk management requires a high level of collaboration between services. Adolescents who use family violence may also be victim survivors of family violence and interventions needs to explore and address this.

Police, youth housing, Child Protection, disability services, alcohol and drug services, education, family services and family violence services all have a role to play with different children and young people. Several areas have specific programs for young people and their families that are designed to respond to adolescent violence. These services may also be used for secondary consultation.

Remember, family violence safety notices and holding powers can only be applied to those aged over 18 years. However, police can take out an intervention order which has conditions that respond to the behaviours being used by the child or young person.

8.11 Managing Risk Across the Community with an Intersectional Lens

As per risk assessment with an intersectional lens, applying an intersectional analysis lens when managing risk means understanding that a person may have experienced a range of structural inequalities, barriers and discrimination throughout their life. These experiences will impact on their experience of family violence, how they manage their risk and safety, and their access to risk management services and responses. A person’s identity and experiences of structural inequality and discrimination will influence how they might:

- Talk about and understand their experience of family violence, or presentations of risk
- Experience trauma or relate family violence to their experience of barriers, structural inequality, and discrimination
- Understand their options for service responses or who they may seek services from
- Explain impacts of the violence they experience.

Remember:

People are multi-faceted and may identify with a range of identities or experiences. You should consider each aspect and look at the person’s whole identity and experience. Think about how these inform your approach to risk management and safety planning.
Where an individual has identified as Aboriginal or belonging to a diverse community or are an older person, there are additional practice considerations which can support more effective risk management.

The guidance below addresses the most common barriers or structural inequalities experienced by Aboriginal people and people who identify as belonging to diverse communities. If you need, seek secondary consultations with appropriate targeted community support agencies to assist you to provide supportive and culturally respectful service responses.

8.12 Risk Management Considerations for Aboriginal Victim Survivors

Some additional risk management considerations for Aboriginal people may include:

- The importance of cultural safety and connections to culture and community. For example, consider how housing or intervention orders affect a victim survivor’s ability to stay connected to family and community
- Ask what family or community members are supportive and may be able to assist if needed
- Confidentiality can be a big concern for the victim survivor, including not wanting gossip or to be made to feel ‘shame’
- Ask if there are any concerns about calling police or emergency services. You may also need to address any fear of engaging with police or emergency services arising from previous experiences
- Understanding they may be cautious about engaging with government, statutory authorities and justice agencies
- Taking extra time to talk about safety for children, how you can support and advocate for them, and taking into account how distrustful the victim survivor may be about Child Protection.

8.13 Risk Management Considerations for Diverse Communities and At-risk Age Groups

Some additional risk management considerations for people from diverse communities and at-risk age groups (including older people) are outlined below. This is not an exhaustive list as every person’s circumstances and relationship with the perpetrator/s and their family, community and culture are different.

8.13.1 For victim survivors from culturally, linguistically diverse and faith communities

- You may need to explain how the law/police systems work. You may also need to address any fear of engaging with police or emergency services arising from previous experiences in Australia or overseas
- You may need to provide information/awareness of Child Protection
- There may be multiple perpetrators — safety planning needs to address the risk for each perpetrator and how their behaviour impacts the victim survivor, individually and collectively
- It’s important to explore the adult victim survivor’s relationship with adolescent children. Some adolescent children may be using violence
• Discuss cultural or religious beliefs that the victim survivor believes would prevent them from leaving. There may also be community pressure, stigma, taboo etc. about leaving the relationship. Impacts of leaving may be far reaching, including on support networks, such as a perpetrator using networks to inflict violence towards family members overseas.

• Support engagement with migration agents about general issues with visa status and consider if you need to refer on or consult with them for information on family violence protection visas.

• Some victim survivors may want to return overseas; this will require exploring options, risk and safety planning. Consider if there are children who are living in Australia and seek advice around this from legal and immigration services, as applicable.

• Consider postal addresses regarding immigration information as migration correspondence may be sent to an address associated with the perpetrator.

• Consider available resources. For example, jewellery may be a woman’s only form of financial independence — if so, discuss options to take jewellery if planning to leave.

8.13.2 For LGBTIQ victim survivors

• Safety planning should consider family of origin and family of choice and how people in each family may be either involved in the family violence or are able to be a supportive person to the victim survivor.

• Specifically affirm and recognise a person’s identity, including in how you plan with them, such as connection to appropriate and safe services and how you facilitate this, such as confirming they are comfortable with you sharing their preferred pronouns in referral.

• Consider if the use of family violence is targeting an area of a person’s identity, such as their gender or sexuality and seek to respond to these specifically in risk management, where possible.

• Risk management should support the victim survivor to be further connected to support systems, where possible.

• Ask if they would like to connect to W/Respect, an integrated LGBTIQ family violence service, or consider if you should seek secondary consultation from that service.

• Ask if there are specific concerns about information sharing or barriers/access to services you can address.

• If there are children in the family, be aware of the complexity of child-caring arrangements for rainbow families. Biological parenthood is not just based on pregnancy — one partner may be an egg donor and claim biological parenthood on that basis.

• An LGBTIQ victim survivor may not feel safe to access mainstream services, including emergency services.

• Safety planning for LGBTIQ victim survivors may require creative eco-mapping of social and other supports:
  - How do you feel about calling the police? Who would you feel safe talking to in an emergency?
  - Where do you work? Who can you rely on in that neighbourhood?
  - Discussing who is safe in the victim survivor’s family of origin or choice, or broader social network.
  - Discussing social contacts that the perpetrator doesn’t know (doctors, children’s play network).
  - Places you can go in an emergency might include well-lit public places: restaurants, community centres, library.
  - Who do you know who you could stay with, and for how long?
What other community support can you consider in emergencies — for example, a range of community and social media?

Are there any issues relating to medication or support aides that you can address, such as where these have been restricted or removed from the victim survivor by the perpetrator.

8.13.3 For older victim survivors

- Be aware of concerns the older victim survivor may have that might impact their capacity to act on a component of the plan
- Emergency planning may need to include an urgent application to VCAT if the appointment of a temporary guardian is needed (for example, the Public Advocate) or a temporary administrator such as the State Trustees Limited to protect property and assets
- Consider whether a referral is needed for a specialist assessment to determine capacity by a geriatrician or GP
- Consider whether a referral is needed to a local Aged Care Assessment Service (ACAS) to assess for aged care services — particularly if a family member is a carer who is perpetrating violence and the victim survivor needs additional supports in place to be able to be safe.

8.13.4 For victim survivors with a disability

- Consider engaging with the Department of Health and Human Services’ Disability and Family Violence Crisis Response to access crisis support for victim survivors with a disability (adults, children and young people). This can contribute to appropriate short-term funds for disability-related supports such as attendant care, hire of equipment, sign/Auslan interpreting and transport costs
- Consider communication and mobility needs, and/or care requirements to determine what supports are needed. Both adult and child/young person victim survivors should be asked if they have a disability and risk management should address these needs individually
- A safety plan should be in an accessible format if required and be readily accessible by the victim survivor. For example, if the person has limited English or a cognitive impairment, design their safety plan to address any barriers. Keep plans short and stepped out. Ask the person if there are other people in their family, friends or other supports in the community who may be able to help with executing a safety plan
- Victim survivors who have a cognitive impairment, such as an acquired brain injury (ABI) or a potential ABI, may have difficulties in interacting with services, retaining information about safety planning, and keeping track of the services or court matter involved. Adapt support and risk management strategies, if necessary, to reflect more intensive case management work that may be required.

8.13.5 For victim survivors with mental health issues

- Family violence can exacerbate existing mental health issues for victim survivors. Symptoms can include nightmares, flashbacks, emotional detachment, insomnia, avoidance of reminders and (‘triggers’) and extreme distress when exposed to these, irritability, hyper-vigilance (watching for anger and signs of violence), memory loss, excessive startle response, clinical depression and anxiety, and loss of appetite

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5 Department of Health and Human Services, 2019, Disability and family violence crisis response.
• This may affect the victim survivor’s capacity to retain information, access and interact with services. Consider asking a victim survivor if you can describe any of these effects to other services to minimise potential triggers and difficulties when engaging with other services for safety planning.

• Use a trauma-informed approach in safety planning. This includes sensitively asking about current or previous trauma events, being alert to triggers and understanding that it may not always be appropriate to ask certain questions or proceed with certain discussions that may retraumatise the person.

• Consider specific safety planning strategies for access to medication if the person is on medication, such as by having spare medication or scripts at a friend’s house.

• Be mindful of trust barriers and work to overcome these. A victim survivor with mental health issues might only trust a professional that has already assisted them. Consider discussing who the victim survivor trusts or who is in their ‘trust group’.

• Mental health professionals commonly provide letters for a person who is travelling internationally, describing mental health conditions and medication a person is taking. A similar process could be used to assist with safety planning and facilitating referral.

8.13.6 For victim survivors in rural and regional communities

• Risk management should respond to any geographical and telecommunication isolation issues. You may need to provide alternative communication methods.

• A victim survivor who is thinking about leaving the relationship or home may consider how to plan this over a period of time through other ‘legitimate’ community, service or employment pathways. For example, you can work with the victim survivor by attending the school or medical service to engage and plan for their exit.

• Risk management should consider confidentiality issues and the perceived or real influence a perpetrator may have in the community or on social and community associations. This includes possible stigma for a victim survivor who lives in a small community.

8.14 What’s Next?

Consistent with Responsibility 4, consider if you need to refer or seek secondary consultation with any services to support actioning the safety and risk management plan (see Responsibilities 5 and 6), and record as required in the Comprehensive Safety Plan template in Appendix 14.

Specialist family violence practitioners also play a vital role in coordination of risk management responses and ongoing risk assessment and management, covered in the next chapter (Responsibilities 9 and 10).

8.14.1 Document in your organisation’s record management system

It is important that you document the following information in your service or organisation’s record management system:

• Individual safety plan for adult or child victim survivor

• 000 and 24/7 crisis services explained, and details provided

• Key workers or supports for the victim survivor

• Key protective factors (trusted person identified)

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6 S Fernbacher in Meadows et al, Mental Health in Australia: Collaborative Community Practice, Oxford University Press Australia (2012).
• Justice system interventions (intervention orders, police statements)
• Referrals made for any additional support (InTouch, Seniors Rights)
• What organisation or service was contacted for secondary consultation to support comprehensive safety plan