

# ANROWS

AUSTRALIA'S NATIONAL RESEARCH  
ORGANISATION FOR WOMEN'S SAFETY

*to Reduce Violence against Women & their Children*

# Compass

Research to policy and practice

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Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia. *The ASPIRE Project: Key findings and future directions*

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ANROWS Compass (Research to policy and practice papers) are concise papers that summarise key findings of research on violence against women and their children, including research produced under ANROWS's research program, and provide advice on the implications for policy and practice.

This report addresses work covered in ANROWS research project 1.2 "Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia". Please consult the ANROWS website for more information on this project. In addition to this paper, an ANROWS Landscapes and ANROWS Horizons paper are available as part of this project.

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#### Acknowledgement of Country

ANROWS acknowledges the traditional owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander elders past, present and future; and we value Aboriginal and Torres Strait Islander history, culture and knowledge.

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# Introduction

## Background

Immigrant and refugee women in Australia are known to face particular barriers accessing services aimed at preventing and responding to family violence. However, there is limited evidence about the contexts, nature and dynamics of violence against immigrant and refugee women that can inform the development of responsive and accessible community-based interventions.

To contribute to the evidence in this area, Australia's National Research Organisation for Women's Safety (ANROWS) commissioned research entitled *Promoting community-led responses to violence against immigrant and refugee women in metropolitan and regional Australia*. The project, known as ASPIRE (Analysing Safety and Place in Immigrant and Refugee Experience), was led by researchers from the University of Melbourne, the Multicultural Centre for Women's Health and the University of Tasmania.

## Project aim

The overall aim of the ASPIRE project was to increase understanding of the nature and dynamics of violence against immigrant and refugee women in different Australian contexts. Our specific research questions were:

1. What are immigrant and refugee women's experiences of family violence and of help-seeking in selected geographic communities in Australia?
2. What are local barriers and facilitators to immigrants and refugees accessing violence prevention and support services in different settings?
3. What opportunities exist for supporting community-led responses to family violence against immigrant and refugee women?

## Research sites

Research was conducted in eight sites across urban and regional settings in Victoria and Tasmania.

In Victoria, research was conducted in five sites: Melbourne's inner north-west (parts of the Cities of Melbourne, Yarra and Moonee Valley); City of Greater Dandenong; City of Brimbank; Latrobe City; and the City of Greater Bendigo.

In Tasmania, research was conducted at three sites, including inner Hobart, City of Glenorchy and the City of Launceston.

## Methods

The ASPIRE project team reviewed the international literature on family violence against immigrant and refugee women to inform the research design. This review was published as an ANROWS Landscapes State of knowledge paper. The research design and subsequent analysis of data were also underpinned by principles of participatory research, an intersectional feminist approach, and input from two state-based advisory groups consisting of representatives from the family violence, women's health, multicultural, settlement and justice sectors. Researchers provided training and support to members of a team of 20 bilingual, bicultural workers who contributed to the design of data collection tools and the collection of data across the eight research sites using a combination of qualitative methods including:

**Interviews with women:** Forty-six in-depth interviews were conducted with immigrant and refugee women who had experienced family violence. Women were interviewed in the language of their choice, with or without an interpreter, by a member of the research team or a bilingual, bicultural worker.

**Interviews with key informants:** Researchers conducted 46 interviews with a total of 57 professionals from a range of services, including representatives from the family violence, settlement, multicultural, interpreting, and law and justice sectors.

**Focus group discussions:** Bilingual, bicultural workers and researchers facilitated 26 focus group discussions with 18 groups of women and eight groups of men from different cultural communities, with a total of 233 community members participating.

**Photovoice:** Ten women from immigrant and refugee backgrounds participated in a series of workshops that enabled them to share their perspectives and priorities about family violence through photography, written reflection and group discussion.

Audio recordings of interviews and discussions were transcribed and subjected to thematic analysis. Researchers conducted participatory analysis workshops with the team of bilingual, bicultural workers to facilitate their contribution to the analysis, with input also sought from the project's advisory groups and the Photovoice participants. NVivo software was used to manage the coding and analysis process.

The Human Research Ethics Committees at the University of Melbourne and the University of Tasmania granted ethics approval for this research.

# Key findings

Analysis of data highlighted that immigrant and refugee women's experiences of family violence, help-seeking and access to information and services are situated within four overarching contexts.

## Overarching contexts

### Immigration context

The experience of immigration and, in particular, visa class, shaped women's experiences of family violence after settlement. This was particularly the case when visa sponsorship established a dynamic of women's dependency on men, and when the conditions of temporary visas restricted women's access to employment, social security, housing, health care, child care and education. Migration led to many women becoming socially isolated. When women were separated from their own families overseas, did not speak English or drive, were settled in regional or rural centres, or had restricted access to networks associated with education or employment, this social isolation could be extreme. In such circumstances, a woman was often beholden to her male partner and possibly his family. Perpetrators of family violence further manipulated these circumstances by preventing women from socialising, learning English and getting information about or accessing services and rights.

Furthermore, many women on temporary visas who left a violent partner were required to apply for residency through the Family Violence Provision or Complementary Protection Visa schemes. While awaiting outcomes of their applications, women were often on bridging visas with restricted access to survival services such as Centrelink and Medicare for prolonged periods of time. For many women, this resulted in high levels of stress, undermining physical and mental health.

### Family and community context

Participants described a range of social, religious and personal values that contributed to the normalisation of family violence in various cultural contexts. However, most held the view that culture, in itself, was not a cause of family violence. Immigrant and refugee women interviewed observed that family violence could occur in any family and in any cultural context, and attributed the perpetration of violence to the belief held by some families that men should have power over women and control the family environment.

Many of the women interviewed described the dominance of men in their families, which was often reinforced by other family members, including those living overseas. Some families and

communities had held women responsible for men's violent behavior, and pressured women to not take any action against men who used violence against them. Women who did so often faced community ostracism. Importantly, however, in some situations, family and community members were trusted sources of support for women, and helped them to either remove perpetrators, leave the family home, or access services and rights.

### Service system context

Despite differences between Victorian and Tasmanian family violence legislation and integrated response mechanisms, outcomes for immigrant and refugee women in this study were quite similar across the two jurisdictions. Interviews highlighted that services in both states are under immense pressure to respond to family violence generally and are under-resourced to adequately meet the specific needs of immigrant and refugee women. Key informants reported pressures throughout the system from police through to courts, family violence services, child protection and legal services. This undermined the services' ability to meet the intensive support needs of immigrant and refugee women, which may be compounded by visa status or communication barriers. Key informants reported high costs associated with assisting immigrant women and their children, who had no income and who required assistance for complex legal, immigration and protection matters. These costs significantly affected family violence services and women's refuges in particular.

Our analysis suggested that the family violence and settlement sectors both have particular strengths and limitations in their capacity to respond to the needs of immigrant and refugee women experiencing family violence. However, in many settings there were notable communication, policy and practice gaps between family violence and settlement services.

Despite these challenges, many key informants expressed a strong commitment to actively developing their ability to meet the needs of immigrant and refugee women in their agencies and were working collaboratively with other services.

### Place-based context

In regional areas the pressured family violence system faced additional constraints caused by the poor availability of key services for immigrant and refugee women, in particular interpreters and migration legal services. Geographical isolation and the lack of transport options exacerbated these challenges, especially when women needed to access pro-bono specialist migration legal services. Interviews revealed that some women

in Tasmania and regional Victoria accessed the few Melbourne-based services available for immigration law advice due to very limited local options.

Regional women's refuges reported accommodating high numbers of immigrant women, as regional refuges were often less constrained by the duration of time women could stay. Many women re-settled in the local area and described a range of benefits of regional life. However, experiences of racism, discrimination and cultural isolation in some of these settings created new risks and concerns.

The co-location of family violence, social, law and justice and other services was a promising place-based feature with particular benefits for immigrant and refugee women. Notable examples included the Neighbourhood Justice Centre in the City of Yarra and health justice partnerships with a focus on immigrant women.

## Women's experiences

The women interviewed about their experiences of family violence had diverse migration pathways, were born in 21 different countries and had varied socio-economic and other circumstances. However there were commonalities in their experiences of family violence, help-seeking and access to information and services.

### Experiences of family violence

The majority of women interviewed reported family violence perpetrated by their male partner (husband or de facto). In some circumstances a woman's father was the primary perpetrator. A number of women also reported family violence perpetrated by extended family, including family members overseas using threatening and abusive behaviour towards the woman or towards her family living overseas.

Women reported that perpetrators used physical, sexual, emotional, psychological and financial violence (including abuse related to dowry and other inter-familial financial relations), as well as verbal and religious abuse, intimidation, shaming, reproductive control and imposed social isolation. Immigration-related violence was reported in most circumstances. This included threats of deportation (often without their children), visa cancellation and withholding immigration documents.

Consequences of family violence reported by immigrant and refugee women included harms to physical and mental health, long-term trauma, periods of homelessness and financial difficulties. Many experienced ongoing harassment and intimidation, and were stressed by vexatious and lengthy legal proceedings. Some women also reported that the mental and physical health of their children was affected.

### Communication and access to information

Challenges with communication and accessing information were a significant feature in women's experiences. While this was a particular concern for women who spoke languages other than English, many English-speaking women also struggled to get clear and accurate information about their rights as they navigated complex legal systems for family violence, family law and immigration matters.

Several women and many service providers reported problems communicating through interpreters and instances of unprofessional and dangerous interpreter behaviour. This included inaccurate interpreting in court settings and interpreters sharing confidential information with women's families and communities. These issues were worsened by the limited availability of interpreters in regional Victoria and Tasmania, and for languages spoken by emergent refugee communities. Participants felt that female interpreters were preferable for family violence work, though professionalism and an understanding of the dynamics of family violence were seen as more important than the gender of the interpreter.

Interpreters reported particular challenges with interpreting in relation to family violence, including vocabulary limitations and taboos, a sense of responsibility for clients' safety or liberty, and vicarious trauma, including the re-traumatising of interpreters from refugee backgrounds. Interpreters interviewed received no debriefing or counselling support, and had never had any training in relation to family violence.

### Experiences with service systems

Women most often sought assistance at the point of crisis prompted by escalation in the severity and frequency of violence and threats, such that they feared for their personal safety and safety of their children. Initial contact was often with police or family violence crisis response services, though some women reported referral to family violence services by a range of other agencies, friends, family, neighbours and employers. Some women had disclosed violence to general practitioners but this usually only resulted in their medical needs being addressed or a referral to a psychologist. A number of women described "missed opportunities" for help from health services.

Many women made multiple attempts, particularly through police contact, to try and stop or manage perpetrators' behaviour. Most commonly, women found the only way to resolve their situation was to escape their homes, often with no idea of what would happen next. These women and their children often ended up in short-term crisis accommodation and, subsequently, refuges for long periods of time. Some women were moved around to multiple locations as under-resourced accommodation services attempted to manage the

costs associated with housing women and children holding visas that restricted access to income support and Medicare.

Women described moving between their pressured home environment and a pressured service environment. While most women had positive experiences with family violence services and women's refuges, many also reported difficulties accessing these services due to high demand (especially if they did not wish to leave the perpetrator). Some women had excellent case-managed support in refuges; however, others felt pressured to make life-changing decisions quickly while negotiating communication barriers (including non-provision of interpreters) and lack of information about their rights and options. Access to a bilingual, bicultural family violence worker or a multicultural family violence support group was very rare but life-changing for women, as this reduced isolation, established cultural safety and provided women with information needed to make informed decisions. Interviews indicated that such specialist services were very limited, especially in Tasmania.

Women had inconsistent experiences with police and justice responses in both states. Some women had positive experiences with police but many reported feeling dismissed, disbelieved, blamed and discriminated against by police officers. Perspectives on pro-arrest and pro-prosecution justice responses were mixed, with some women expressing relief when police took immediate action, while others had not anticipated and were overwhelmed by the rapid response or confused because of previous inaction by police. Women described being surprised that they ended up in court very quickly and some were happy to receive family violence orders for protection. At the same time, many women had to deal with perpetrators who contested orders over multiple hearings or applied for cross-orders as an intimidation tactic. Women also described being bullied by perpetrators through the family law system, which they believed continuously put their children's safety and well-being at risk.

Finally, we found that family violence prevention initiatives targeting immigrant and refugee communities were limited in reach, had rarely been rigorously evaluated and may not be inclusive of the contexts and forms of violence women experience.

# Future directions

## Key messages for service providers and policy-makers

Findings from the ASPIRE project give rise to a number of recommendations for federal and state-based government and community agencies to strengthen prevention of and responses to family violence against immigrant and refugee women. Action is required to:

- Amend immigration policy to recognise that perpetrators of family violence can include any family member, including non-sponsors; expand access to the family violence exception to persons on non-partner visas (e.g. students, partners of students, fiancées); and remove barriers to Centrelink income support and Medicare-funded services for any victim of family violence regardless of visa status.
- Increase linkages between family violence responses and agencies relevant for immigrant and refugee populations (such as migration and settlement services, multicultural and ethno-specific services, consular services and English language programs).
- Ensure family violence definitions and risk assessment tools across Australia are relevant for immigrant and refugee populations, recognising that family violence includes multi-perpetrator violence, immigration-related abuse, ostracism from family and community, and exploitation of joint and extended family arrangements and financial obligations.
- Train and resource services that come into contact with immigrant and refugee women (e.g. settlement services, cultural associations, English language programs, healthcare services) to understand and respond to the dynamics of family violence and facilitate referral pathways to specialist support.
- Recognise interpreters as an integral part of the family violence system, and support reform of the interpreting industry through development of interpreter capacity and mechanisms for interpreter support, monitoring and feedback in relation to family violence interpreting.
- Create multi-language written and audio resources for broad dissemination in places that are central to daily life (e.g. schools, workplaces, shopping centres, health services) to provide information about family violence, where to access support, and what to expect from police, courts, family violence and other relevant services.
- Provide options for women to access “mainstream” as well as specialist multicultural family violence services, and ensure availability of refuges that are funded to provide intensive and long-term support for immigrant and refugee women and children.
- Develop a robust bilingual, bicultural family violence services workforce that is reflective of local populations and adequately trained and clinically supported to respond to the needs of immigrant and refugee families.
- Provide ongoing training to all parts of the family violence system about the additional risk factors, immigration issues and support needs of immigrant and refugee women and their children.
- Ensure family violence prevention programs engage with multicultural women’s services and women leaders from immigrant and refugee communities, and are based on evidence about the contexts in which immigrant and refugee women experience family violence.

## Key messages for researchers

The ASPIRE project contributes to the Australian literature on family violence against immigrant and refugee women; however, there remain a number of limitations to the current state of knowledge. Future research should include:

- Investigation of the experiences of women who have no connection with service providers while dealing with family violence. (Most women participating in ASPIRE were already connected into the family violence system.)
- Collaboration with police to examine their capacities and experiences responding to family violence in immigrant and refugee communities.
- Analysis of the effectiveness of family violence risk assessment tools when used with immigrant and refugee women, and potentially the piloting and evaluation of adapted risk assessment processes.
- Bilateral comparative studies with researchers in major source countries for migrants settling in Australia, to improve supports available to women experiencing family violence in both their homeland and in post-migration diasporic contexts, including family violence facilitated by communication technologies.
- Rigorous evaluation of programs that address the primary prevention of violence against immigrant and refugee women.
- Strategies to ensure that research to establish the prevalence of family violence in Australia involves collection of sufficient data from immigrants and refugees to generate robust estimates of prevalence in this particular population.
- Longitudinal investigation as to how acculturation affects the prevalence of family violence and violence-supporting attitudes in communities.



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