

Women's Health Policy Alliance Communique

15 October, 2019

Forum 5 | Health impacts of violence against women and girls

The fifth and final in this series of the Women's Health Policy Alliance forums was held last Tuesday evening at The George Institute for Global Health in Sydney. Jean Hailes for Women's Health, together with the Global Women's Health Program at The George Institute, co-hosted the final forum in our policy series. The series focused on how the women's health sector can work together to address the priorities and actions identified in the [National Women's Health Strategy 2020-2030](#) (NWHS). This forum focused on Priority 5 – Health impacts of violence against women and girls.

Associate Professor Karen Walker, Program Manager of the Global Women's Health Program at The George Institute, alongside David Lloyd, CEO of Jean Hailes, opened the forum. A/Prof Walker spoke about the research goals for the Global Women's Health Program, with a focus on better treatments, better care and healthier societies, to improve health and health outcomes for all women. "We need to find better treatments, transform primary health care and harness the power of communities, governments and markets to improve women's health." A/Prof Walker said.

In his introduction, Mr Lloyd acknowledged that in this area of women's health, like many women's health organisations with a focus on biological/medical health, Jean Hailes still had much to learn. "Our role here tonight is to just listen" said Mr Lloyd.

Dr Patricia Cullen from UNSW School of Public Health and Community Medicine and The George Institute, also presented at the policy forum, on three research projects she and her colleagues are currently undertaking. These research projects are focused on identifying effective interventions, significant policy and practice gaps and service delivery needs for addressing domestic and family violence. Dr Cullen stated that there is a need to take a holistic approach to domestic and family violence, and that "trauma must be treated at a cognitive, emotional and physical level." It is anticipated that the findings from these research projects will help inform future policy design, program development and service delivery to better support women and children who experience, or are at risk of experiencing, domestic and family violence.

The recent release of the [Fourth Action Plan of the National Plan to Reduce Violence against Women and their Children 2010-2022](#), was discussed early in the forum. This Plan acknowledges that gender equality is the key to ending violence against women and their children, highlighting the need to 'create a society that is more equal in terms of gender equality, and one that better reflects our diversity and difference... to address some of the key drivers of violence against women and children in the first place.' It was considered by the forum participants that the upcoming [Women's Health Symposium](#) is the ideal time to discuss 'what comes next' for the Fourth Action Plan, recognising the significant role that organisations such as Our Watch and the Australian National Research Organisation for Women's Safety (ANROWS), would take in progressing action.

Participants discussed the importance of working with health care practitioners to improve trauma informed care and gendered drivers of domestic and family violence. Existing training programs produced by the Royal Australian College of General Practitioners and the Australian Medical Association family violence resources were highlighted as tools that could be further enhanced, for example, to provide training for all health care providers, or to include the voices of those with lived experience in training programs. One participant in the forum, who is herself a survivor of domestic violence, talked about how she shares her experience with medical students, in order to improve the students' understanding of domestic and family violence. It was emphasised that there is a need for women with lived experiences to engage with medical students and other health professionals as part of their early training.

There were a range of initiatives that were discussed that could be built upon or adapted, particularly to meet the needs of the priority population groups identified in the NWHHS. These included Imperfect Allies, which is being trialled through [Waminda](#) in Nowra, [The Orange Door](#) family violence intake service, or [InTouch](#), a specialist family violence service that works specifically with multicultural women. Existing women's health centres that provide a flexible model of care to address family and domestic violence, to 'meet the woman where she is at', were highlighted as services that could be replicated.

It was agreed by participants that there is a need to deliver better support and resources for coordinated and responsive advocacy and domestic violence support services, recognising the need for both crisis intervention support and early/primary intervention services. This will require cross-sector engagement and innovative approaches focusing on primary prevention to [Change the story](#) for women and children experiencing domestic and family violence in Australia.

As outlined in the Fourth Action Plan, domestic and family violence services must be focused on whole of population initiatives that address primary prevention, as this is the most effective way to eliminate violence against women and their children – changing behaviours and norms, attitudes, stopping violence before it occurs.

"This forum reinforces the need to address all ends of the spectrum, from crisis support to primary prevention," said Mr Lloyd. "But the need for fundamental change in the form of broad-based gender equality underpins every social and economic determinant. Everything else we want to say or do about the health impacts of violence against women and girls starts from that."

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