'You can't hide it – Family Violence Shows'

Family Violence in New & Emerging Refugee Communities

(Afghan, Sierra Leone and Sri-Lankan Tamil)

Participatory Action Research Project

Funded by

Western Sydney Area Assistance Scheme (WSAAS) Communities NSW

Report written by

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The Centre for Refugee Research
UNSW

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* Title taken from a comment made by a young refugee participant in this project.

DEDICATION

This report is dedicated to a colleague - the late Mary Dimech - whose legacy in multicultural policy and community initiatives has changed the way diverse communities are both thought about and approached. Mary is especially remembered for her dedication to social justice and equity, and in particular, her advocacy for the rights of women and children.

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PARTICIPATING ORGANISATIONS, COMMUNITY MEMBERS AND NETWORKS

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EXECUTIVE SUMMARY AND RECOMMENDATIONS

In 2002, a consultation group chaired by the Refugee Council of Australia prepared a discussion paper on domestic violence and family breakdown in newly arrived refugees and humanitarian entrant families. Participants in this discussion forum, including two leading Integrated Humanitarian Settlement Strategy (IHSS) service providers in NSW, identified domestic violence (DV), and its presence in emerging refugee communities as a key concern. A discussion paper produced after this forum made a series of recommendations in regards to improving support for refugee women who experience family violence. In 2010, similar concerns are still being made by refugee communities and community workers. To date, many of the recommendations from this paper have not been taken up.

Over the past years, the term 'family violence' has been used more and more in public policy documents and community spheres as it acknowledges that violence occurs not only within the immediate family, but also within the extended family or community (Murray & Powell 2008). The refugee communities that were involved in this project preferred the term 'family violence' as it is inherently more inclusive of the broader range of relationships in which violence may occur.

From the outset, this report acknowledges that family violence exists and occurs across all cultures and communities, and is not particular to any one group. Whilst there is no evidence that suggests one group experiences higher rates of family violence in the available literature, what findings do indicate is that refugee women are more vulnerable due to refugee-related factors such as inadequacy of basic needs in camps, repeated displacement, prior experiences of war and apprehension due to an 'uncertain' future (United Nations 2005).

In the country of refugee resettlement, a combination of lack of knowledge of laws, the stigma associated with help-seeking, the intersection of religion, race, gender and class (Mandrson & Benette 2003) uncertainty with visas and permanency, and the fracturing of family structures all contribute to refugee women being a particularly vulnerable group within broader Australian society. Add to that, the demonising of asylum seekers and refugees within sections of the media and through political discourses, and systemic discrimination, refugee women are extremely sensitive to seeking formal support services (Rees and Pease 2006).

RESEARCHER AND SUPPORT ORGANISATIONS

The principal researcher, Amrit Versha, a community-based worker with extensive experience in the migrant and refugee sector and PhD student attached to the Centre for Refugee Research (CRR) initiated this project. A one-year project with a regional focus was envisaged, and with the assistance of the Hills Holroyd Parramatta Migrant Resource Centre (THHP MRC), and CRR research supervisors Dr Eileen Pittaway and Dr Linda Bartolomei), this project was made possible through the support of the Western Sydney Area Assistance Scheme (WSAAS), Communities NSW.

PROJECT OBJECTIVES

The primary objective of the project was to develop partnerships across the sector and create a participatory action research framework for examining the intersection of family violence and settlement.

While in the course of achieving the formally declared aims and objectives, through the participatory process, the researchers were able to identify that there were some overall visions emerging from the three main components of the project. These are as follows:

- Researcher's Vision:
  - To collaboratively identify strategies with refugee communities to inform the development of an integrated delivery system capable of meeting the needs of the refugee women and families who are experiencing or are at-risk of experiencing family/domestic violence during settlement.
- Stakeholder Agencies (Mainstream services and Refugee services) Vision:
  - To be better resourced, equipped, accessible and equitable in order to service to the specific needs of refugee women and their families who are experiencing or are at- risk of experiencing family/domestic violence; and to provide them with a holistic service in dealing with this issue during the settlement process.
- Refugee Community Sector Vision:
  - A more understanding, just, inclusive and gender-sensitive system for supporting women by effectively addressing settlement issues and their impacts on family relationships, enabling women to lead full lives without fear of violence, and without being demonised or their communities being pathologised.

SUMMARY OF RESEARCH FRAMEWORK & METHODOLOGY

The project commenced in September 2009, with the employment of nine bilingual workers from the three target groups, Sri Lankan Tamil, Sierra Leonean and Afghan communities. The project also engaged bilingual workers from two other Migrant Resource Centres in the region, namely Auburn and Blacktown. The researchers gathered qualitative data through an expansive consultation process and quantitative data from secondary sources that will be examined in detail in this report.

The consultations were conducted across three data streams:

1. Refugee communities,
2. Bilingual and ethno-specific workers who provide settlement support to new arrivals
3. Mainstream domestic violence support services.

Nine community consultations were held at various locations in the Metro West Department of Human Services-Community Services region over a five-month period. The consultation venues included a mosque, two churches, a school and local community organisations. The approaches mobilised were educative, consultative and solution-driven. The workers conducted the consultations in community languages and the researchers

attended the consultations as observers. Ethics forms were translated and explained before the commencement of every consultation. Significantly, the consultations were attended by women, men and community leaders. Additionally, women's only consultations were held to ensure that women felt safe and supported in speaking about their experiences of violence and attitudes towards violence within their own communities. Case studies from each of the target communities were collected to gain a more in-depth understanding of the specificities of violence for this study.

Inter-agency collaboration was crucial in the collection of stakeholder data. The researchers facilitated discussions with fifteen key networks. These included the Domestic Violence Interagency meetings (4), Multicultural Network (1), team meetings of settlement services (3), Integrated Settlement Services Strategy (IHSS) providers (2), relationship and counselling services (2) and health services (3).

As part of the project, two networks were developed to further enhance the reflective cycles of qualitative data collection. Significantly these two networks initiated a dialogue between settlement service providers and family and domestic violence services. Some of the providers on these networks include the Hills Holroyd Parramatta MRC, Auburn Diversity Services , Anglicare Emerging Communities Project, Australian Centre of Languages (ACL), Immigrant Women's Speakout Association of NSW, Holroyd City Council, Older Women's Network, NSW Police Regional Domestic Violence Strategy, Flemington Local Area Command, Parramatta Local Area Command, Metro West Department of Human Services - CS, Women's Health Advisor – South Western Sydney Area Health Service (SWSAHS) and SydWest Multicultural services.

EMERGING ISSUES AND FINDINGS

Secondary quantitative data was collected through the reference group to gain a deeper understanding of the experiences of the target communities within the broader domestic and family violence systems. Significantly, respondents overwhelmingly reported an explicit lack of useful data that accurately identified newly-arrived refugee women in the domestic and family violence system.

Further, members of the three community groups – Afghan, Sierra Leonean and Sri Lankan Tamil - whilst recognising that the term 'family violence' is not easily translated into any of their languages, all expressed deep concern about the perception that domestic violence is seen as a cultural issue, rather than a gender issue when it comes to their communities, and that refugee communities are judged on this issue differently to mainstream white Australian communities. This perception in turn has contributed to a lack of open discussion about family violence because advocates and leaders within communities feel they are forced to engage in a racialised discourse, rather than a discussion about gendered family violence.

The main issues that emerged from these consultations included:

- Pre-arrival: the psychological and psycho-social impacts of war, fractured families as a result of deaths and killings, changing gender roles, the impact of sexual violence on women and extended stays in exploitative situations in second countries.

- Settlement post-arrival: culture shock, the continuing shifts in gender roles, unemployment and underemployment, children and youth issues, the privileging of western parenting styles, language barriers, loss of family support and networks, the stigma associated with professional help-seeking exacerbating family conflict during the settlement process.

- Visa issues: the Afghan community in particular highlighted the impact of the Temporary Protection Visa (TPV) on family life, which was introduced in 2000 and then abolished in 2008, with participants stating that it took between 6 to 8 years to bring their families to Australia. Similar experiences were expressed by young Sri Lankan Tamils. Sierra Leoneans highlighted issues with proposers and the time frame of applications as an area of concern for the community.

- Economic pressures: the three communities saw lack of education about Centrelink payments for parents and young people as a critical issue that impacts on families and family relations. Specifically, when younger family members leave home and neglect the cultural norms of their communities, it creates significant conflict and divides within the family.

- Perception of police: communities reported that information and education about when a DV matter becomes a crown case is not provided. The Sierra Leonean community discussed a model - the Family Support Unit - used back home as a reference point for calling police in matters of family violence. According to those consulted, this unit functions as a mediating body.

- Children's issues: the three target communities expressed both confusion and alarm about issues concerning children. Children integrate much more quickly than parents and thus take on the role of 'carriers' of information for the family, and often act as interpreters. Further, parents felt their parenting skills are brought into question with the expectation that they adopt a Western style of parenting.

- Changed gender roles: men experience fundamental changes in their primary role – from 'breadwinner' to 'unemployed'. This point was emphasised in all consultations. Sustained engagement with refugee men in education programs that target both vocational and social needs is lacking.

The other two streams of consultations confirmed the above findings with bilingual workers expressing deep concerns about the converging impacts of pre-arrival human rights violations and post-arrival settlement issues. They recognised serious gaps in service delivery including a lack of access to low cost family counselling services, and a lack of bi-lingual support groups, family support services and refuges that are culturally sensitive and have the capacity to accommodate women and children together. One of the urgent issues that this group especially wanted highlighted was the lack of coordination between the domestic violence system and the settlement service support system.

In 2010, while mainstream services attempt to address, in varying degrees, the need for staff to develop cultural competencies in working with refugees, there remains an explicit lack of understanding of the differences between migrants, refugees and asylum seekers and their specific needs and issues. Mainstream agencies and workers identified multiple barriers to accessing refugee clients and the inability of women's refuges to respond to the diversity of

cultural and linguistic needs. One worker referred to the whole domestic violence system as a 'mismatch of Anglo services with refugees'. Another suggested that domestic violence was a cultural issue for 'these' communities. Workers also corroborated a point made by bilingual workers - that there was minimum coordination between domestic violence services and settlement services.

In the last phase of the project, the researchers conducted a forum facilitated by Linda Bartolomei from the Centre for Refugee Research where the initial findings were presented. Bilingual workers, reference group members and senior policy staff from key organisations and departments discussed strategies to progress the findings. The Hills Holroyd Parramatta Migrant Resource Centre pledged its commitment to taking the discussion on coordination of issues between domestic violence and settlement services forward through the establishment of a 'Round Table'. It is anticipated that some of the reference group members will also play a part beyond the life of this project.

RECOMMENDATIONS

The refugee sector is rich in social capital, and mainstream services must work in respectful partnerships with settlement service providers to ensure that the diversity of refugee needs are recognised and addressed. Policy makers and service providers must also recognise and utilise the social capital of refugees in all their complexity and diversity, including knowledge, experience and expertise, in providing solutions and alternatives.

The potential of refugees as social capital underscores our recommendations that have been divided into three streams.

RECOMMENDATION FOR PRACTICE

- A human rights framework must underpin education and training programs for refugee communities, both pre- and post-arrival. 'Train the trainer' packages must be developed, critically evaluated and adequately resourced to encompass the diversity within refugee communities. The program must include modules that address gender, family relationships and laws in Australia. This training must be strength-based and focused on changing family dynamics and communities in transition during the settlement process. Refugees must be skilled up to develop and deliver this training to other newly arrived refugees.

- 'Learning Circle' models should be developed to facilitate communication between women, men, children and young people. The 'Learning Circle' is a community development model that utilises community education as a tool for social change. This model is successfully operating within African communities in Western Sydney around family and child protection issues. It was originally piloted by Community Services (CS), and then evolved into a funded project with THHP MRC as the community agency managing the project. Through this model, services providers and African communities come together as equals to exchange information and to develop relationships based on mutual respect. The Sri Lankan Tamil community identified a similar model - 'The Study Circle' – a template that is culturally meaningful for the purposes of community education in an Australian setting.

- Alternative models of intervention and prevention that focus on strengthening families should be developed and trialled. As recommended by Sierra Leonean communities, the 'Family Support Unit' is one such model that specialises as a mediating body of intermediaries who work with police and legal services as community counsellors and educators. This model focuses on building the capacity of communities to ensure prevention of family violence in refugee communities, providing culturally specific specialist support.

- The capacity of key religious and community leaders, who are the first point of contact for women, should be further developed so that they are able to provide effective support on domestic and family violence issues. It is anticipated that training leaders in systems advocacy and Australian laws and policies will ensure that they are able to provide advice and information that is relevant and accurate for an Australian legal framework.

- Mainstream services should be sensitised about refugee issues by refugees themselves; this is key to changing the way the mainstream services approach both individuals and communities. Refugees expressed concerns about the lack of knowledge that exists in current training about the ethnographies and narratives of refugees and thus recommended training and storytelling as a way of educating about specific historical contexts of communities who become displaced. The existing training programs do not use this information, but rather utilise models developed by those who have 'no understanding of the settlement journeys of refugees'. A strength-based approach utilises the knowledge and experiences of refugees and has the capacity to minimise generalised assumptions about 'refugees as violent people' and thus 'bring justice to refugee experiences.'

- Direct service provision should be strengthened through the setting up of ethno-specific therapeutic and support groups for refugee women and men to facilitate the healing of war, using traditional methods identified by refugee communities and in partnership with them. Mainstream counselling services need to get involved in piloting and evaluating such models free of cost for newly arrived refugees.

- Family violence education programs for refugees should be significantly different from the mainstream model. They should not be one-off sessions focussing on definitions of violence but be holistic in their approach like health promotion programs based on 'English for Health' (Family Planning NSW n. d.) model.

- A framework for coordination between settlement, family and domestic violence service systems should be set up. This can be through a round table facilitated by a settlement service provider. This should create a dialogue through sharing of knowledge whilst influencing a culture change in the domestic and family violence service system.

- 'Cost-free' services for family relationship and family support counselling should be set up for newly arrived refugees.

POLICY RECOMMENDATIONS

- It must be recognised at the policy level that family relationships and family violence have a strong interface with settlement. IHS services and settlement workers must be resourced and adequately funded to deal with family violence issues. Equally, mainstream services must take responsibility and provide appropriate and accessible information and support to the refugees. This involves better coordination between the relevant Federal and State Departments.

- Resourcing and training of women's refuge workers, domestic violence and family services is critical to working sensitively with refugee women and their children. This requires a cultural shift in the way refugee rights are acknowledged. Cultural competency should underpin refuge practices to ensure that the rights of refugee women as survivors of violence are protected and that they are not forced to return to violent homes due to lack of culturally sensitive services.

- Streamlining of the data collection system will facilitate the development of prevention and early intervention programs that are targeted and appropriate for different communities.

RESEARCH AND DEVELOPMENT RECOMMENDATIONS

- For refugee women who do not want to use the police in family violence situations, alternative models must be researched, developed and critically evaluated.

- Research, develop and critically evaluate family conflict resolution programs that take into account the cultural knowledge and traditional approaches. These programs should centre traditional conflict resolution practices and be built into both existing and future programs.

- Longitudinal and in-depth action research using reciprocal approaches must be undertaken with refugee communities to explore the links between children's issues and family violence.

RECOMMENDATIONS ADOPTED AT THE WORKSHOP

Bilingual workers involved in consultations presented the initial findings and their recommendations at a workshop that was organised by the researchers at THHP MRC. The following recommendations were adopted:

- A 'Round Table' should be set up to progress the recommendations from the report. The current reference group members are to be invited to participate and play a role in progressing the findings of this research.

- Multicultural Community Liaison Officers (MCLOs), located within the police, should prepare and disseminate multilingual educational information about when family matters become a crown case.

'Change is slow, but one needs to be a part of this process in order for changes to happen in the future. We cannot lose the opportunity of being a part of the change process.' (Refugee worker)

1 INTRODUCTION

In 2002, family violence was recognised as a pressing issue for newly-arrived refugees from emerging communities across the Western Sydney region in a consultation chaired by Refugee Council of Australia. In a paper prepared from this initiative, consultation-specific strategies were identified to facilitate better coordination of service delivery to refugee women experiencing family violence. In 2010, refugee communities and community workers continue to express the same concerns as reported in 2002, and anecdotal evidence suggests that newly-arrived refugee women continue to experience heightened family violence. Family relationship issues are not recognised as settlement issues, and settlement services – the first point of contact for refugee women, are neither resourced nor funded to deal with issues of family violence.

Sensitivities around research that focuses on family violence within a particular community is an issue of concern that has been expressed by refugee communities and advocates alike, emerging from the fear that the data will be used to demonise and label refugees in negative ways. In a 2006 report titled, *Introduction to the Refugee Settlement, Safety and Wellbeing Study*, researchers Rees and Pease identified that, 'the deficit of prevalence data can be associated with the complexity and sensitivity of the problem of family violence in immigrant communities. The under-reporting of incidents, and the potential misuse of data to stigmatise particular communities act as deterrents for researchers' (2006, p.7).

A literature review undertaken by Runner, Yoshihama and Novick (2009) stressed that research on inter-personal violence (IPV) in immigrant and refugee communities was limited and often flawed. Accordingly, it could be misleading to aggregate different groups in one study. Yoshihama also observed that in the context of a displaced community struggling to survive in what could be a hostile and discriminatory environment, 'acknowledging interpersonal violence as a problem is viewed as detrimental to the collective survival of the community.' Therefore, 'there is strong pressure to maintain a positive image of their community and remain silent about the problem of inter-personal violence' (Runner, Yoshihama & Novick 2006, p. 4).

 Whilst violence against women is a global issue that affects all women in all communities, the vulnerabilities and needs of newly-arrived refugee women are specific, requiring a sensitive, critical, specialised and coordinated response.

The literature on settlement in Australia indicates that it is a long and difficult process, and as one refugee woman expressed, 'it is only understood by someone who lives it'[1].

According to the Settlement Services Review, settlement is a five year process[2] and support services are provided only for that period of time. Newly arrived, small and emerging

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[1] See 'Stakeholder interviews', Auburn MRC Annual Report, 2001.
[2] See http://www.immi.gov.au/media/publications/settle/_pdf/execsummary.pdf p9/15

communities include a considerable number of refugees, humanitarian entrants and asylum seekers. These target groups often fall through the gaps and are invisible in larger immigration and settlement studies, precisely because they are small in number, are emerging as communities and relatively recently arrived. Another important feature is that they are politically, culturally and socially fractured, often lacking the political power and capacity for systems advocacy to equitably access resources (Australian Domestic & Family Violence Clearinghouse Newsletter 2004). Significantly, newly arrived refugees from small and emerging communities have minimal or no support or community infrastructure (Kyle & Macdonald 2004).

Key research over the past two decades identifies and confirms that *settlement factors contribute to the risk of family violence for refugees* (Rees & Pease 2008; Rees 2004; Pittaway 2004; Menjivar & Salcido 2002; Sharma 2001; Easteal 1999; Jang, Lee & Morello-Frosch 1990; Krishnan 1997; and Perilla 1999).

1.1   WORKING WITHIN A HUMAN RIGHTS FRAMEWORK

While the political, civil, cultural, social and economic rights of refugees and internally displaced peoples are enshrined in various international human rights conventions, those rights need to be re-asserted and re-affirmed in the context of contemporary political discourses in Australia that position asylum seekers as 'illegals', rather than in a humanitarian framework. This issue remains pressing, particularly for Afghan Hazara and Sri Lankan Tamil communities who have been affected by these politics in the period this research was undertaken.

Experiences of displacement and dislocation, trauma, violence and uncertainty have profound effects on individuals, families and collective communities. Refugees are channelled around systems, and in the main, are powerless in determining where they finally end up. This research project specifically explored the impact of pre- and post-settlement issues faced by recently arrived refugees in Australia on family relationships. The researchers examined these issues through a human rights framework, inclusive of the right to:

- an adequate standard of living, including adequate food, shelter and clothing,
- work and basic labour protections,
- the highest possible standard of health and access to health care
- live in a healthy and safe environment,
- education - free and compulsory elementary education, readily available forms of secondary and higher education,
- freedom from all types of discrimination
- protection from economic and sexual exploitation, particularly for refugee women and children,
- participate in decision-making which affects a refugee's life, family, and community,
- sustainable development and to peace.

1.2   HOW THE PROJECT WAS DEVELOPED

With the support of the Hills Holroyd Parramatta Migrant Resource Centre (THHP MRC), this project was conceived to explore the interface between domestic and family violence and settlement. A regional one-year Western Sydney Area Assistance Scheme grant from Communities NSW made this project possible. From the outset, the aim was to forge a partnership between community-based agencies and the Centre for Refugee Research (CRR) at the University of NSW in order to develop a model of research practice that utilised and valued the social capital within refugee communities and the community sector at large.

The target groups - Afghan, Sierra Leonean and Sri Lankan Tamil communities - were initially identified through THPP MRC statistical data. Statistics gleaned from the Department of Immigration and Citizenship on Australia's refugee and humanitarian program indicate that the Metro West Region remains the most popular settlement destination for refugee communities, with 7320 arrivals in the last five years. Numbers of arrivals from Afghanistan were 1262, followed by 776 Sri Lankan Tamils, and 361 arrivals from Sierra Leone (DIAC 2010).

The project commenced in September 2009, with a research team made up of female and male bilingual workers from Afghan, Sierra Leonean and Sri Lankan Tamil backgrounds. The principal researcher, Amrit Versha, was provided with support and assistance from Rugmini Venkatraman, a community associate. The researchers were supported by the Manager of THHP MRC, Melissa Monteiro, and academic supervision was provided to the principal researcher through the Centre for Refugee Research (CRR) at the University of New South Wales.

The objectives of the project were originally developed with key stakeholders for the Western Sydney Area Assistance Scheme (WSSAS) funding application. They were to:

- Develop community and stakeholder capacity to deliver and develop an action research project on family violence in newly arrived refugee families.
- Undertake participatory action research to establish evidence-based approaches to family violence prevention and intervention in refugee communities.
- Improve and enhance existing service provision for refugee families affected by domestic and family violence.

Developing partnerships between family violence services, refugees and the settlement services sector was a crucial aspect of this project. Two groups were established to facilitate the development of these partnerships. They were:

Community Consultative Group (CCG)

- This group was made up of bilingual workers from the three refugee target communities. They provided the linguistic and cultural knowledge for the project. The members of this group received two days of training on reciprocal research methods by CRR in order to conduct participatory research with refugees. This method was developed and has been used to engage refugee communities overseas

and in Australia. Following this training, the workers invited other workers of similar backgrounds from the two other Migrant Resource Centres, Immigrant Women's Speakout Association of NSW Inc, Australian Centre of Languages (ACL), and Service for Torture and Trauma Survivors (STARTTS) for the first bilingual service provider consultation. This group was involved in all stages of the project.

Participatory Action Research Group (PARG)

- This stakeholder group consisted of representatives from Blacktown, Auburn and THHP Migrant Resource Centres (MRCs), Integrated Humanitarian Services providers (IHS), the police, women's health, Communities NSW (formerly Department of Community Services), Regional Domestic Violence Strategy, and representatives from local councils. This group was critical in providing support in the collection of secondary data, linking the researchers to stakeholder groups, and providing internal networks for consultations. The MRCs provided access to their groups and hosted the consultations.

1.3 DEFINITIONS, BACKGROUND AND CONTEXTS

Domestic violence is typically defined as an abuse of power within intimate partner relationships. More specifically, domestic violence is the domination, coercion, intimidation of one person by another by physical, sexual, emotional, verbal and financial means within intimate relationships. Over the last decade, the more inclusive term 'family violence' has been adopted in Australian public policy discourse and some community settings in acknowledgement that violence may also be perpetrated by other family and community members (Murray & Powell 2008). In Australia, approximately 71% of domestic assault incidents reported to the police involved a female victim, and 80% of offenders were male (People 2005, p.6). Domestic violence perpetrated against women by their male partners remains the most common form of family violence in Australia (Partnerships Against Domestic Violence 1999).

Family violence is prevalent in all communities regardless of one's ethnic or religious background, ancestral history, educational and income levels, age, health status or sexual orientation. Women and children are the major victims of domestic and family violence, and this abusive and violent behaviour is mostly perpetrated by male partners and/ or fathers and stepfathers (Domestic Violence Crisis Service A.C.T. n.d.). In Australia, family violence is common in all geographic areas and within all socio-economic and cultural groups.

The Family Law Courts of Australia (Family Law Courts of Australia n.d.) defines family violence as 'conduct, whether actual or threatened, by a person towards, or the property of, a member of the person's family that causes any other member of the person's family reasonably to fear for, or reasonably to be apprehensive about, his or her personal well-being or safety.' The common forms of violence in families include spouse and partner abuse, child abuse and neglect, parental abuse and sibling abuse.

Based on the above, family violence is therefore a more appropriate term than domestic violence as it encompasses all forms of abuse in diverse cultural settings, especially where extended families play a pivotal role in all domestic matters.

1.4 THEORETICAL PERSPECTIVES: TOWARDS A MORE COMPLEX UNDERSTANDING OF FAMILY VIOLENCE

The earliest theories on family violence situated this form of violence as pathological, individualistic and it was 'victim blaming' (Gayford 1979; Toch 1969, Price & Armstrong 1978).

In more recent times, however, Western feminist views of domestic violence have positioned women in the broader contexts of societal gender inequality and oppression, and that a woman's degree of exposure to family violence is much more evident and prevalent than men's exposure to family violence (Tjaden & Thoennes 2000).

Social and feminist theories argue that domestic violence operates normatively within patriarchal systems of power, and are inherently about the 'unequal' power relationships

between men and women. Such theories affirm that men perpetrate violent behaviour towards their female partners, because such behaviour is inherent in a patriarchy[3], and not because of their personal traits. Based on this, feminists argue that patriarchy is an 'instrument' of power used by men to suppress and subordinate women (Corry, 2002).

Patriarchal systems of power can thus be defined as the manifestation and institutionalisation of male dominance over women and children in the family and the extension of male 'power' over women in society at large. In other words, men hold power in all the important social institutions and women are given unequal, secondary status in society. As 'men' and 'women' are gendered terms to begin with, contemporary patriarchal culture is essentially about maintaining power in all arenas, including in family contexts.

In South Asian settings, traditional norms of gender stereotyping and patriarchal values are implicated in gender-based violence, where women are subjected to social norms that insist they remain 'faithful' in family life, be 'obedient' to male authority and that domestic violence is a 'private' issue not to be taken up for public scrutiny (Manderson & Benette 2003, p. 11). Thus, activism around women's rights has become a primary cause of anxiety in many communities, with charges of 'cultural imperialism' directed at women activists within those communities who both challenge male authority and call into question views that normalise violence against women (ASeTTS 2009, p. 14).

Domestic and family violence does not take place in 'cultural isolation', so theories such as 'intersectionality' (Crenshaw 1994) attempt to develop a more critical approach to understanding issues around gendered violence within marginalised and refugee communities, particularly within multicultural contexts like Australia. Racism, heterosexism and class oppression all figure in the lives of refugee women (Bogard 2005). The interesectional approach argues that while gender inequality is the primary cause of domestic violence, it is not the only factor that underpins the violence experienced by women in marginalised groups. In short, gender inequality is informed by other forms of social inequality and oppression (Sokoloff 2004). Thus, domestic violence can be analysed within diverse socio-cultural settings, as well as in terms of structural inequalities which shape the lives of refugees and the marginalised (Sokoloff 2004; Andersen & Collin 2001; Mann & Grimes 2001), without reducing the violence experienced by refugee women to simplistic racialised frames.

Pittaway and Rees (2005-06) use the framework of 'cumulative risk' to study the dynamics of family violence among refugee communities. Cultural values, violation of human rights and experiences of the 'refugee journey' increase the risk of family violence, in particular, women's socio-culturally constructed vulnerability. They argue that women's traditional gender roles and cultural norms of 'masculinity' are threatened by external pressure which often leads to 'preserving' 'cultural' practices and gender inequality within a refugee setting, and with a patriarchal culture still evident among the mainstream, host society (Rees &

[3]Patriarchy is a form of social organisation in which the father is the supreme authority in the family, clan, or tribe and descent is reckoned in the male line, with the children belonging to the clan or family.

Pease 2007). Thus, external conditions often lead to extreme practices among refugees than what was practiced in their home countries (AseTTS 2009, pp. 13-18).

Over the past decades, women's human rights activism has highlighted gender-related abuses as a form of torture and fought for gender-specific redress at the international level. Significantly, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)[4] established women's rights as human rights. CEDAW, of which Australia is a signatory, situates violence against women as a violation of human rights and of the right to life. This important document calls for the right not to be subjected to torture or to other cruel, inhuman or degrading treatment or punishment; for the right to equal protection under the law; for the right to liberty and security of person; and for the right to the highest standard of physical and mental health, as well as for freedom of expression and association (International Human Rights Internship Program and Forum-Asia n.d.).

1.5   WAR EXPERIENCES AND ITS IMPACTS ON REFUGEE WOMEN

As discussed, violence against women is a common form of gender oppression. It is a weapon used to impose control over women and girls' lives. Refugee women in particular have specific experiences of war-related violence, most notably, sexual violence.

Pre-arrival experiences of refugee women may also include forced, multiple displacement, detention, witnessing family members being killed, disappearances, malnutrition, starvation and poor health due to lack of availability and access to medical facilities and medicines, and torture and trauma. In addition, stress-related alcohol abuse by men in refugee camps contributes to an increase in violence against women. Post Traumatic Stress Disorder (PTSD) and other psycho-social problems are common among displaced populations who have experienced any of the above events. Lack of access to counselling and other support services, and the stigma associated with such services, prevents many internally displaced peoples (IDP) from seeking professional help (Multicultural Youth South Australia Inc. & Shopfront Youth Health and Information Services n.d).

With pressing basic needs and apprehension about long term safety and their futures, women are highly vulnerable to family violence in such conditions, even though the issue is under-played in most reports on refugees and IDPs (United Nations 2005). Children, for their part, both witness and experience abuse in camps, suffer neglect and psycho-social problems, develop distorted views of relationships, a distrust of peers and social incompetence (NSW Women Refugees Resource Centre n.d, pp.71-82). Pregnant women from war-affected zones and in displacement camps do not receive adequate health care services. Child birth takes place in dangerous conditions with the help of 'family members

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[4]The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), adopted in 1979 by the U.N. General Assembly, is often described as an international bill of rights for women. Consisting of a preamble and 30 articles, it defines what constitutes discrimination against women and sets up an agenda for national action to end such discrimination. Available at: -
http://www.un.org/womenwatch/daw/cedaw/cedaw.htm; (Accessed 01/06/2010).

who have no formal training (Sri Lanka, Department of Census & Statistics and UNICEF 2001, pp.38-39).

Post-settlement, as displaced communities struggle to survive in an unfamiliar and at times indifferent host environment, reporting incidents of family violence is viewed as a 'negative' factor for the collective survival of communities' (Runner, Yoshihama & Novick 2009). Anecdotally, fear of authority figures, including the police, hinders the reporting of incidents of family violence in refugee communities.

In short, refugee women not only face cultural barriers that inhibit access, but have very real fears of community backlash should they report the violence outside communal norms and structures.

1.6 AUSTRALIA'S RESPONSE TO REFUGEES

As a signatory to the UN Convention on the Protection of Refugees, Australia's Humanitarian Program is but one component of a broader immigration program.

The size and composition of the refugee resettlement program is limited by:

- The number of people likely to be in need of protection in Australia (as per international obligations under the Refugees Convention);
- United Nations High Commissioner for Refugees (UNHCR) assessments of the resettlement needs of refugees overseas;
- Views expressed by individuals/organisations in Australia during community consultations with the Minister for Immigration and Citizenship;
- Australia's capacity to assist.

In 2008–09, a total of 13,507 visas were granted, of which 11,010 visas were granted under the offshore component and 2497 visas were granted under the onshore component. In the offshore visa[5] component, visas to people from Asia and the Pacific comprised 33.09 per cent.

In May 2008, the Government announced an increase in the Humanitarian Program to 13,750 places for 2009–10. In 2009, the Refugee category was set at 6000 places, and 7750 places under the Special Humanitarian Program (SHP) category and for onshore protection needs.

The Australian Government's Refugee and SHP accommodates 13,500 refugees annually, for people subject to persecution in their home country and in need of resettlement. Refugees arrive in Australia either through the offshore program where most applicants are referred by the UNHCR (2001), or as onshore asylum seekers. Refugee visas cover the

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[5]In 2008–09, Offshore visa grants by top ten countries of birth are Iraq, Burma/Myanmar, Afghanistan, Sudan, Bhutan, Ethiopia, Congo (DRC), Somalia, Liberia and Sierra Leone.

categories – refugees[6], in-country special humanitarian migrants[7], those under emergency special humanitarian protection[8], emergency rescue[9] and women at risk[10] (DIAC 2009).

1.7 RESPONSES TO DOMESTIC AND FAMILY VIOLENCE

The Family Violence Act of Australia 1975 provides for victims of family violence and their families. Broadly, a domestic violence protection order issued at the state level (eg. Intervention Order, Apprehended Domestic Violence Order, Protection Order) is implemented together with prohibitions, restraints and related conditions imposed by the Order. The overlaps and gaps between the Family Violence Act 1975 and the State & Territory Domestic Violence Protection Order were examined in a report which found significant differences in maximum penalties for contravening a Domestic Violence Order, approaches to counselling services and police obligation towards action in cases of suspected domestic violence. From the point of view of women victims of domestic violence who want to leave their abusive partners, the report sought an inquiry into the interaction of domestic violence laws by examining the process of registration of Domestic Violence protection Order and the 'probability' between jurisdiction (Family Relationship Services Australia, 2009 cited in McClelland & Plibersek 2009).

In 1994, the Women's Legal Services NSW (formerly known as the Women's Legal Resources Centre) published a report *Quarter Way to Equal: A Report on Barriers to Access to Legal Services for Migrant Women.* The report documented the experiences of newly arrived migrant and refugee women and the difficulties they experienced in accessing legal services in relation to issues such as housing, domestic violence and immigration. The report highlighted the issues faced by newly-arrived CALD women that included limited finances to fund their own legal cases, low levels of English language, lack of knowledge about the

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[6]Refugee visa- subclass 200: with referral from UNHCR should meet health and character requirements. Upon arrival they are eligible for a full range of Australian Government settlement services

[7]In-country Special Humanitarian visa - subclass 201: for off-shore applicants and they have the same entitlements as SHP entrants;

[8]Emergency Special Humanitarian Protection visa- sub class 202: applicable to those who are outside their home country, subject to substantial persecution in their home country. They receive less support than refugee visa entrants into Australia, but entitled to a modified initial settlement package provided by the state.

[9]Emergency Rescue visa- subclass 203: for emergency cases where an applicant has an immediate threat, as referred by UNHCR with less than 48 hours from referral for their removal. They have the same rights as a refugee visa.

[10]Woman at Risk visa - subclass 204: for vulnerable women and children (eg. female headed households, single mothers, and abandoned/single women) subjected to extreme violence. Referred by UNHCR or other agencies, they have the same entitlements as refugee visa entrants (Department of Immigration and Citizenship).

legal system and legal services, availability of legal aid, difficulties with the provision of interpreters and translations, and a lack of sensitivity on the part of service providers in addressing the needs of CALD women.

Ten years later, both the NSW Government Violence Against Women Specialist Unit (VAWSU) and Women's Legal Services (WLS) set out to revisit *Quarter Way to Equal* in order to gauge how much progress had been made in addressing the barriers facing migrant and refugee women accessing legal services, and to identify any new or emerging issues experienced by migrant and refugee women in NSW.

The VAWSU review of the status of the *Quarter Way to Equal* recommendations focused on government and court-based agencies. The results are documented in an unpublished report *Creating Pathways to Access* (2004). Overall, the review found that about half of the recommendations from the *Quarter Way to Equal* Report were implemented, but that a proportion of this work was 'one-off' projects with little follow-up. There was also a lack of monitoring of the ongoing work.

Another report, *Long Way to Equal* (2007) primarily documents the results of the Women's Legal Services research, but also describes and documents the recommendations from the VAWSU research. The *Long Way to Equal* research showed that while the needs of migrant and refugee women are by no means static, overwhelmingly the legal access barriers identified by the *Quarter Way to Equal* report remain significant sources of difficulty for migrant and refugee women in their interactions with the Australian legal system.

Both reports point out the need for co-ordination, monitoring and sustained activity over time in order to address the recommendations made. A fresh commitment by state and federal governments to co-ordinate and monitor progress in a sustained manner is long overdue. A principal responsibility of the state is to ensure the availability of adequate, appropriate services to meet the needs of all. Services should ensure equality and access and that the right to self-determination is respected.

That said, the development of new collaborative arrangements in NSW, such as the NSW Legal Assistance Forum and the NSW Law and Justice Foundation's Legal Referral Forum provide new opportunities for the justice sector to work together to improve access to justice for migrant and refugee women.

In view of the ongoing struggle of CALD communities to access resources and participate in all aspects of life, the NSW Government has most recently identified a range of programme outcomes in 2010. The new State Plan (2010) recognises that CALD communities will grow in number (including newly arrived refugees) particularly across Western Sydney. In response to the increase in population, the number of multicultural workers who will provide bilingual/bicultural casework services to the CALD population will be increased. Plans are underway to expand the translation and interpreting services of the Community Relations Commission by the use of modern technology. While funding projects and services for CALD communities through the MRCs across the state is a focus, the Plan also encourages their public participation to promote harmony, co-operation and collaboration within the communities (NSW Government 2010, p. 54).

1.8 KNOWLEDGE PRODUCTION, PROJECTS AND GOOD PRACTICE MODELS

In developing community responses to assist refugee women affected by family violence, approaches need to incorporate a human rights framework that centres both the personal safety and cultural specificities of women as a priority. A critical review of psycho-social aspects within policies related to refugee settlement and social integration, in particular during the early stages of re-settlement could reduce the risk of family violence and ensure interventions are based on knowledge of ethno-cultural specificities and refugee experiences. This is applicable to the individual psycho-social level as well as at group levels for community issues, both of which are interrelated. Interventions are needed in respect to family values, within a human rights and legal framework (Rees & Pease 2006).

In keeping with the migration policies and procedures to accommodate refugee and migrants from CALD backgrounds in Australia, we need to change our thinking about domestic violence issues and how the support service sector should effectively respond to their specific needs. An insight into how knowledge has been developed in domestic violence and its consequence related to service provision and perceptions places criticism on some social concepts. The framework of conceptual errors examines the construction of knowledge. It finds that as long as the significance of culture is overlooked there will be no transformation of knowledge, and changes occurring within service delivery will be limited (Minnich1991 cited in Bent-Goodley 2005). Bent-Goodley's model of cultural competence continues to be overshadowed in domestic violence service provision, from research to the appraisal of programs. According to Goodley, to change a situation, one must change one's thinking and identify the four conceptual errors applicable to domestic violence:

- *Faulty generalisations* which refers to the belief that women of colour, middle/upper-class women and those in homosexual relationships do not experience domestic violence despite evidence indicating otherwise.
- *Circular reasoning* is one that puts forward a single viewpoint and undermines the other related views. Evidence-based practice, research and qualitative assessment using diverse methodologies allow for development of different cultural perspectives.
- *Mystified conceptualisation* is the systemic institutionalized manner in which knowledge is propagated and becomes 'cyclic'. Many women from CALD backgrounds do not leave abusive partners because they do not receive appropriate support through social services, mental health or criminal justice systems to protect themselves from domestic abuses.
- *Partial knowledge* occurs without in-depth analysis, where sections of information are considered factual, thus reinforcing the system. For example, considering the ways in which domestic violence legislation has been enacted with inadequate understanding of the specific circumstances encountered by those from CALD communities.

By identifying the above, we can bring about changes in 'institutional thinking' and develop a more critical approach in service provision. For CALD communities to receive culturally responsive services, development in the following key areas is required: better integration of cultural skills in domestic violence service delivery, appraisal of culturally competent

programs and reflection on cultural sensitivity in policy making, coupled with an increased prominence of CALD communities in the design, conceptualisation, implementation, and evaluation of domestic violence research (Bent-Goodley 2005). Overall, we need to develop knowledge on domestic violence through the lens of human rights so that we can change the institutional thinking and practices that affect the lives of individuals, communities and society at large.

An American study on support agencies that engaged community leaders to intervene on domestic violence cases found that it lead to community activism on the issue (Runner, Yoshihama & Novick 2009). However, the victim/survivors returning to their communities were reluctant to act as advocates to raise awareness, as a result of 'shame' and fear of retaliation. Approaches used by service agencies revealed a lack of an aggressive, long-term community-changing strategy. Alternatively, skills-training for women to engender self-sufficiency was found to serve a prevention purpose. Overall, support service agencies lacked the ability to communicate effectively with victims, and needed to overcome cultural incompetence and the victims' lack of trust in those institutions. This study also pointed out the lack of cooperation from Voluntary Resettlement Agencies (VOLAGs), those institutionally geared towards keeping families together, in working with refugee victims of inter-personal violence. The study suggested that it may not always be practical for every agency to engage in their efforts directly and explicitly. However, if funders expect serious community organising from service organisations, they need to recognise that resources must be allocated specifically to that effort (Runner, Yoshihama & Novick 2009).

Involvement of communities - specifically the male members - in the prevention of family violence among immigrant communities is a 'positive' approach for community actions, as they mostly have a better awareness of how family violence is perceived by other men in their community, and can help determine the best ways to deliver culturally appropriate community education and public awareness on issues of immigrant and refugee men.

The *Strengthening Families in Canada Project* involved male participants and found that there was consensus that physical violence between spouses was not acceptable. This project identified economic stress, cultural adaptation, alcohol/substance addiction, miscommunication, intergenerational conflict, child discipline and adaptation, and shifting gender roles as strongly recurring themes in family abuse. Family disintegration was seen as a critical concern. Providing immigrant and refugee communities with targeted information, education and an emphasis on prevention with a focus on issues including cultural adaptation and child discipline was found to facilitate a better understanding of the laws and the system in which the newly arrived find themselves. Conducting awareness raising programmes for men, women and children with the involvement of refugees and migrants in all aspects of education programmes was seen as crucial. Requests were made for a 'Train the Trainer Domestic Violence Prevention Education' program for immigrants and refugees with topics on program development, workshop design, and public speaking/ and facilitation skills (Simbandumwe 2006).

The *Religion and Family Harmony Project* was initiated by the then NSW Strategy to Reduce Violence Against Women in 2002, through a partnership between the Regional Violence

Prevention Specialist (Western Sydney), Parramatta, Rosehill and Holroyd Local Area Commands NSW Police and Cumberland Women's Health Centre. The project used an inter-religious, multicultural and educational approach in changing the prevailing beliefs and actions of both religious leaders and secular communities in relation to domestic violence. Its outcome was based on the premise that the rich resources of the diverse experiences and backgrounds of these communities and the training and information that this project provided will empower communities to effect a positive change in the lives of both victims and perpetrators of domestic violence. The project worked in partnership with the religious and community leaders, mostly males, from various cultural, ethnic, religious and language backgrounds. The project engaged them in various consultations and training workshops on domestic and family violence, and provided them with information and resources to assist them in dealing with victims and perpetrators including referrals to appropriate services and support systems. As a result, leaders from various faiths such as Bahai, Sikh, Buddhist and Islam had undertaken to do community education on domestic violence and promoting family harmony. The project was run without any specific funding for three years and was successful in getting the National Crime Prevention Grants for the following two years. A train the trainer package for community leaders was developed as a result. However, due to lack of specific funding, it was not possible to follow up with various groups, nor to set up and resource a monitoring reference group.

In working towards the prevention of family violence among communities in transition, the Ecological Model is a framework that shows how prevention fits within the structure of domestic violence services (The New Mexico Coalition Against Domestic Violence 2010). Developed in the1970s for research on child abuse (Gabrino & Crouter 1978), this model gained popularity in social research related to violence (Heise 1998). In conceptualising cross-sectional approaches to studies on violence, the model accommodates the complex nature of family violence and incorporates viewpoints placed by feminists and social scientists. In examining the nature of family conflict in three communities affected by war-related violence, it reveals the interrelationship between family violence and other forms of social abuses (as refugees, women and disadvantaged groups) experienced by the groups (ASeTTS 2009, pp. 114-118) from their pre-arrival phase up to resettlement in a host-country. Culturally constructed norms about traditional gender roles of women and men are acknowledged in this model, which in turn are challenged by the mainstream culture and the process of resettlement, thus affecting attitudes and behaviour. The model has four levels as shown below (ASeTTS 2009, pp. 114-118):

- Individual: history of other forms of violence, exposure to domestic violence during critical developmental stages, drugs and alcohol.
- Family and other Relationships: the micro-system in which individuals exist.
- Community: the community, neighbourhood, or meso-system influencing individuals.
- Society: the macro-system which influences individuals as policies, laws and cultural beliefs.

Individuals, familial, communal and societal attributes support the nature and extent of domestic abuse that has far-reaching consequences on individuals, families and society at

large. The complex interconnections between these factors are explained by the needs of individuals and families in relation to their specific environment. It also reflects the lack of access to information and resources related to 'power sharing' within family and community domains, and exemplifies the much needed 'balance' between the various sectors in resolving family violence and to create harmony within households (The New Mexico Coalition Against Domestic Violence 2010).

In conclusion, the concerns around refugee women's heightened vulnerabilities are paramount, as manifested throughout the available literature and in the projects reviewed in this report. There is unity in the literature on gender oppression and recognising refugee women's experiences of violence in refugee camps, compounded by on-arrival issues of social isolation, low socio-economic status, racism, inadequate access to resources and services. Prevention strategies need to understand the social risks associated with family violence for refugee women, in order to enable a critical approach that promotes safety and respect as a way forward.

2 | METHODOLOGY

The project used a participatory action research (PAR) model for gathering qualitative data from three separate streams over a period of six months.

- Stream 1 - Refugee women and men from Afghan, Sierra Leonean and Sri-Lankan Tamil backgrounds.
- Stream 2 - Bi-lingual workers as stakeholders and key informants for refugee communities.
- Stream 3 - Domestic and family violence networks and services.

The researchers prepared and submitted an ethics application to the UNSW Ethics Committee, obtaining consent to conduct community consultations as the primary methodology of the research.

Participatory Action Research (PAR) by its very nature is a strategy whereby groups of people can organise the conditions under which they learn from their own experiences and make this experience accessible to others (McTaggart, 1989; Wadsworth 1998). It is a method of research where creating positive social change is the predominant driving force. Thus, by definition, PAR is a 'collective, self-reflective enquiry undertaken by participants in social situations in order to improve the rationality and justice of their own social practices' (Kemmis & McTaggart 1988, p.5).

PAR is based on the theory of possibility, providing an opportunity to foster social and collective partnerships. For refugee communities to engage meaningfully with researchers about their past and present experiences in a collaborative manner, it was important that they be assured that this was not just 'another consultation'. Critical to this was what refugees would say to the researchers about family violence and the settlement system. This could only be achieved if a safe and supportive space was provided to all participating communities and organisations.

The community development approach applied in UNHCR's work with refugees aims to empower refugees. Their community development policy is underpinned by the fact that refugees should be 'subjects' in the search for durable solutions and considered resourceful and active partners, rather than 'objects' or passive recipients of assistance. Community development promotes a better quality of life based on the initiative and active participation of the entire refugee community. Such participation is fostered through a number of specific techniques: awareness-raising and community mobilisation that focuses on and enhances ownership (UNHCR 2001). Through its participatory action approach, this research project aimed to do just that.

2.1 Stream 1: Community Consultations with refugee communities

Language is a critical consideration in any work undertaken with refugees. Whilst it is argued that 'speaking for others is a political issue,' (Alcoff 1991; Back & Solomos 1993, Wilkinson & Kitzinger 1996), using translators and interpreters helps construct meaning out of what refugees want to say themselves and indeed share with others.

Using refugee workers as 'conduits' and 'enumerators' gave the project an edge of 'social involvement', which is critical to the democratic, reciprocal, non-hierarchical and cooperative processes required to work with survivors of war, where power has been used to destroy the very core of the individual. Consultation as a method of research acknowledges dialogue in real life with real people who are voiceless in other contexts, including in Australian policy terms.

A decision was made in consultation with the CCG that bilingual workers from the target communities would facilitate the consultations. The workers were the 'insiders' with a rapport established through their existing work and this enabled engagement on the otherwise 'private' issue of family violence.

> *'Language is an important part of conceptualisation, incorporating values and beliefs, not just a tool or technical label for conveying concepts.'*
> *(Temple & Edwards 2006; p. 41).*

The consent forms were translated into Dari for the Afghan community, whilst the other two communities used the English versions. Each community team decided on their venues, advertising and education strategies. Although the workers were keen to use the reciprocal methods of consultation that they received training on, it was not possible to implement this method due to the constraints of time and monetary resources. A decision was made by the groups to combine the consultation with an education session. The bilingual workers would first provide information and facilitate the process of discussion around definitions of family violence in an Australian context. They would then encourage storytelling, break down the stories to identify pre-arrival and post-arrival settlement issues and then assist the groups in working on solutions. A standard information package was developed and provided to the workers as a resource for them to use during the consultation and information provision sessions. Researchers attended all consultation meetings to provide support to bilingual workers, to learn from the communities themselves, and to answer any questions.

From the start, the Afghan community wanted to run education sessions through the media. One of the workers went on air through the SBS Dari program and conducted several sessions on family violence before inviting the participants to a consultation. In the consultations, they presented stories using pre-arrival and settlement themes. The facilitators then asked specific questions using these themes, with participants recording their responses on butcher's paper. The solutions-focussed approach encouraged critical thinking across the group. The consultations with the Afghan community attracted women,

men and religious leaders and started a robust discussion on the issue of family violence. The Hazara Afghan community requested a separate consultation due to issues of identity and language. A mixed consultation was organised and hosted by Auburn Diversity Services and a women's only consultation was held at the Auburn Public School for the Hazara community.

The Sierra Leoneans ran their consultation in a church with the pastor and a worker as co-facilitators of the consultation. This mixed consultation was widely publicised and attracted men and women from across Western Sydney. A second consultation was mixed and hosted by Auburn Council with a liaison officer from a local school being trained as the facilitator. SydWest Multicultural Services was the host of a third well-attended consultation that brought together men and women and included recent arrivals and survivors of family violence.

The Tamil community hosted two separate men's and women's sessions in a church. Religious leaders and community members attended the consultations. Due to the current sensitivities of the situation in Sri Lanka, the communities were initially reluctant to engage with the issue of family violence. The researchers went through the existing local women's groups. The bilingual workers, a counsellor from STARTTS and volunteers for the community invited researchers to their events and trust was established through a number of these engagements before an attempt was made to recommence the process of consultation. The second time around, the men's consultation received a favourable response with a number of young men and community leaders attending and providing valuable contributions and insights for this project.

2.2   STREAM 2: BILINGUAL WORKERS

Over the years, qualitative researchers have utilised 'key informants' in various ways to provide information and facilitate discussion on the social world of the participants of the study (Bulmer 1984). Acknowledging the experiences of refugees, bilingual / bicultural workers are able to offer an empathetic and informed approach as they share backgrounds and have themselves faced similar traumas, difficulties and barriers. This is, at times, a more important consideration than their technical role as 'interpreter'. Their linkages become 'pathways' to access and their experiences of 'belonging' strengthen key aspects of the research (Song & Parker 1995).

A major challenge faced in planning PAR is designing a process to achieve the best possible outcomes. This requires a combination of creativity, imagination and sensitivity on the part of the researcher (Wadsworth 1998). While the elements 'participation' 'action' and 'research' are conceptually different, in most developed forms of PAR, the differences begin to 'merge' or 'dissolve' in the process.

Whilst some of the bilingual workers acted as planners in the community consultative group (CCG), they were also agents of social change. This action was deliberate and also strategic in order to open up dialogue and to generate potential movement on this issue. Where PAR differs from other research methods - the action/ change happens in reality and not as an experiment 'just to see if it works'. The workers as refugees themselves and

through their experiences of working with refugees can be thus seen as critical to effecting lasting change.

The consultation with workers was undertaken formally through their managers and team leaders of their respective organisations. The managers/team leaders organised for the researchers to meet with the workers in work time and written consent was acquired before each consultation. The sessions were largely open discussions on family violence with their perspectives being sought out, followed by stories and issues concerning their clients, and finally proposed solutions that would produce real outcomes for their clients. They then discussed how they might implement some of the solutions and bring about positive change for their clients in their current roles as workers.

2.3 STREAM 3 MAINSTREAM SERVICES

The mainstream service providers included the domestic and family violence prevention networks throughout the CS region, health service networks, and team meetings of health providers, including early childhood nurses at community health centre. These consultations were discussion groups with information collected through stories, questions and ideas as solutions. The researchers approached the network convenors, and requested that the project be the agenda of the meeting; project information was presented and discussions were facilitated by the researchers. Once the responses were documented, the participants were then asked to present solutions to the highlighted issues.

Please see Figure 1 – Summary of consultations on page 22.

FIGURE 1 - SUMMARY OF CONSULTATIONS

Community consultations	Bilingual workers	Mainstream services
• Afghan (48 women, 42 men) n=90 • Sierra Leonean (23 women, 33 men) n=55 • Tamil (25 women, 23 men) n=48	• Integrated Humantarian Settlement Strategy workers (ACL) • STARTTS bilingual counsellors • The Hills Holroyd Parramatta MRC • Auburn Diversity Services Inc. • SydWest Multicultual Services • Other- Anglicare Emerging communities project and ethnospecific projects • Total Bilingual workers: n=40	• Domestic and Family violence networks n= 4 • Counselling services- Relationship Australia Strength to Strength Team Immigrant Women's Speakout Inc n=2 • Health services and Networks - Women's Health and Industry, FGM Project, Refugee Health Improvement Network, Multicultural networks n=4 • Community Health Early childhood nurses • n=10

3   FINDINGS AND DISCUSSION

Using a human rights framework as a tool for analysis, the following sections aim to detail and discuss the findings from the consultations with the three communities. Most of the emerging themes in the consultations were common to all three communities, verifying that family violence does not occur in isolation of structural inequalities (including gender, race, visa status, unemployment, traditional and western value systems). The findings are presented predominantly as quotes to ensure that the views of refugees are conveyed first hand. The quotes are left unedited as a mark of respect to the individuals who participated in this project.

It is important to note that the findings and discussion section has been broken into two groups: communities and stakeholders.

3.1   COMMUNITIES

Consultations with the target communities indicate that they are resilient and adaptable, and ready to seize resettlement opportunities that are available in a culturally divergent host society with its multitude of resources and options (Pittaway & Muli 2009, p. 6).

3.1.1   PRE-ARRIVAL ISSUES

Pre-arrival issues among refugees range from psychological and psycho-social impacts of war - fractured families due to deaths and 'disappearance' of family members, loss of property and impoverishment, forced displacement, change in gender roles and impact of gender based violence on women due to their extended stay as refugees under exploitative situations in second countries. Refugees and asylum seekers from Afghanistan, Sierra Leone and Sri Lanka (Tamils) revealed what has previously been documented about the impact of war (Refugee Council of Australia 2002). Torture, trauma, loss of home/property, conscription by militants, imprisonment/detention, war violence, multiple displacement (Johnson & Phoenix 2003, p.7) were all cited and are typical of refugee experiences.

'The post war effect, such as trauma from a war ravaged background, we have witnessed violence and been subjected to so much hardship, that continues to have great impact our life.' (Sierra Leone, Male Participant)

'...We come from the war-torn areas and we have been subjected to massive abuses in our country of origin... trauma due to war experience and mental health issues. Our families have seen a lot of violence. [They] have lost homes, relatives, and friends and displaced, where they live under harsh IDP situations...' (Sri Lankan Male Participant)

Living as a refugee in Pakistan, Iran and in refugee camps where basic needs and medical services were minimal was an appalling experience as recounted by Afghan refugees. This is backed up by international studies as discrimination and harassment in refugee camps is documented. For example, an Iranian woman who married an Afghan man is 'stripped of' her Iranian citizenship whilst the man faces the threat of being sent back to Afghanistan (Strand, Suhrke & Harpviken 2004).

'We moved from Afghanistan and lived in Iran for 8 years. The conditions were very bad. We were called by different names. They didn't pay us. We just put our heads down and worked. I used to work as a domestic help for a rich family, this man and his wife and children kicked me'. (Afghan, Female Participant)

'..We lived in Pakistan and were treated like slaves. I wake up in the middle of the night and cry for my sister who was killed in front of me. I want to bring her children here.' (Afghan, Female Participant)

'My wife and kids...they lived in harsh situation in other the countries of refuge, in India...as third class citizens...' (Sri Lankan, Male Participant)

3.1.2 UNDERSTANDINGS OF FAMILY VIOLENCE

Refugee women's understanding of domestic and family violence is greatly influenced by the gender roles that codify women as 'obedient' and 'faithful' to family. As such, domestic abuse has no direct translation in any of the languages of the target groups and is regarded as a 'private' family matter not to be discussed in public. Socialisation of women within such a setting acknowledges 'patriarchal power' is primary and women are forced to live within this paradigm. Men are typically seen as the 'bread winner and head of the household'.

'...My husband was killed in war and then my elder son became like his father. All money, he keeps. I don't know if that is good, but I am happy-he gives me good life -less headache for me... Yes, he gets angry, too much work for him, and then he saw his dad killed, his sister doesn't listen to him and argues too much. But, she has to obey as … he feeds us all ...' (Afghan, Female Participant)

' ...Yes, there were problems between husband and wife and fights but it was not called anything. People would say 'they are fighting because they have no respect for each other and family. They are not good people. Woman is not listening to man'...' (Afghan, Female Participant)

'Back home there is only one head of the family - the husband is the breadwinner. There is no word [for] domestic violence back home…problems occurred and elders intervened.' (Seirre Leonean, Male Community Leader)

'Our men came from being the leaders of the house, even if they come to Australia the older people will not change (60 years and above-Grandparents)... both men and women think that domestic violence is happening all the time – happened with my grandparents, with my parents – so what is the big deal? But it is big deal for us, we want it to stop' (Sri Lankan, Female Participant)

Whilst most women and men were aware of occurrence of family violence, their varying understanding of family violence is explained by some by relying on home culture as a reference point, by others from differing socio-cultural and individual perceptions.

'People will say according to the Afghan culture, domestic violence is acceptable but this is just an excuse - they don't abuse because DV is acceptable, they do it because of the frustration. According to Afghan culture domestic violence is only considered as physical violence (e.g. hitting).' (Afghan, Male Participant)

'...she was living in very high domestic violence and her husband kicked her out of the house twice, but still she wanted to go back to her husband because she can't take care of her kids without him. If my husband is not there, tomorrow my children will not listen to me...' (Afghan, Female Participant)

'...Domestic violence means depriving any one of anything; forcing the wife to do everything at home and controlling is domestic violence. That's what they told me in a group I went to'. (Sierra Leonean, Female Participant)

'In a family, if someone physically beats someone it is domestic violence. It could be physical, verbal and sexual abuse, it means conflict and no understanding...Materialism is one the things that is affecting family harmony in our community...our children are the primary victims, because they grow up without love and happiness which they will later transfer onto other people.' (Sri Lankan, Male Participant)

3.1.3 POST-ARRIVAL & SETTLEMENT ISSUES

In post-arrival Australia, 'cultural shock' is a phenomenon registered by all communities as they transition into a 'different' society with different norms and values. Rapidly shifting gender roles, financial dependency on the state, unemployment and underemployment are cited as key issues. Parenting is a very specific challenge: dealing with children and youth issues, an unfamiliarity with 'Western' parenting styles, and basic communication barriers are immediate concerns and contribute to a sense of powerlessness and a loss of authority. In a post-arrival context, refugee communities do not have the extended family or familial networks to discuss family relationship problems with, nor any other kind of family support. Furthermore, the 'perceived' stigma associated with professional help seeking exacerbates family conflict during the settlement process, and often results in family violence scenarios.

3.1.3.1 FAMILY REUNION AND THE VISA PROCESS

Refugees and asylum seekers from Afghanistan and Sri Lanka relate their experiences of being detained in camps, where conditions were less than satisfactory, seeing their lives as 'detainees' as most 'unproductive'. Each individual is screened and interviewed, and either granted a refugee visa or else rejected with scope for an 'appeal'. As such, the duration of life as a detainee is largely unpredictable.

'...I came to Australia on a boat-we went to Christmas Island and then got a Temporary Visa[11]. I left my family there, my two daughters. They came now after 7 years, they don't know me. They like their mother but they think I am stranger.' (Afghan male participant)

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[11]Prior to 2008, a person who applied for asylum was granted a TPV (Temporary Protection Visa) if their entry has been authorised, and the person has fulfilled the criteria. Holders of TPV had refugee social benefits only up to 36 months. After the abolition of this law in 2008, refugees could apply for Resolution of Status (RoS) visas which give applicants the same entitlements as permanent visa holders. Refugee Council of Australia. Refugee Program : Program Overview. Available at: www.refugeecouncil.org.au/arp/overview/ ; (Accessed 11 March 2010).

'...Those who arrived in Australia earlier and are fairly settled never relate well with those who came to Australia on the temporary protection visa – it's a kind of stigma.' (Sri Lankan, Male Participant)

Most TPV holders presented anxiety and agitation, with episodes of suppressed anger against the perceived injustice related to their detention experience and temporary status in Australia. Insomnia, depression, tension headaches, gastro–intestinal disturbance and bodily aches and pains are common health conditions of TPV holders. Compounded by their other losses, these health issues have lead to a state of chronic depression. In group sessions, TPV holders expressed anger about conditions in the detention camps where even pregnant women and children were denied food and water for long periods. Proper medical attention was out of the question and many claim to have noticed a slow deterioration in their psychological health around this period (Fernandes 2002).

Furthermore, it took between six and ten years for a person (mostly men) to sponsor the family and thus be reunited with them in Australia. During this extended period of separation of husband from wife and children, gender roles inevitably changed. For men, this change was outside their control as they waited for years on TPVs without the rights ordinarily afforded to refugees. For women, the change was seen as something 'new'. Children, after long years of physical separation, saw the father as a 'stranger'. These conditions have directly contributed to relationship and family breakdown.

'..Same thing happen to lot of us. Our kids were small when we left, now they are big. It took very long for us to bring them here. Our wives are also different now.   They saw too much war, we see too much Australia...' (Afghan, Male Participant)

'Long waiting period before reuniting with family – when wife and children join the husband/father, both parties have changed; they have learned to live without each other.' (Sri Lankan, Male Participant)

'...Cultural change impacts on the male ego, increases possessiveness within relationships; element of suspicion when living in the new society.' (Sri Lankan, Female Participant)

For the Sierra Leonean community, similar issues emerged with partners who arrived first and then proposed for their wives or husbands to come.

'...woman may sponsor her husband from Africa, but she develops another relationship in this country during the long years of separation from her husband. Domestic violence starts because of this soon after the husband arrives; husband too forms other relationship...he doesn't want to admit that he has moved on.' (Sierra Leonean, Female Participant)

3.1.3.2   SOCIAL ORIENTATION
A challenge for refugees during the resettlement phase was the 'time frame' given to refugees to orient themselves to the new system. Many expressed a preference that orientation programs be 'spread out' over a longer period of time, with participants highlighting the short time span in which they were expected to familiarise themselves with the social and legal frameworks of living in Australia.

'...In a very short time they expect us to comply with the rules here. We are given 5 minute orientations about domestic violence by some workers when coming to Australia and we laugh about it then.' (Afghan, Male Participant)

'...Though we were given a pre-arrival orientation about Centrelink, soon after we arrive here after a long, anxious and tiring journey, we forget about it. We don't understand it when we are there. (Sierra Leonean, Female Participant)

'... Orientation given to me was brief, soon after arrival...I could not grasp much, as I was exhausted after the long, apprehensive journey...' (Sri Lankan, Female Participant).

Significantly, participants expressed interest in using their time at different points in the migration process as an opportunity to learn, including prior to arrival.

'We lived in detention this long, why don't they teach us all we need to know while we are there? In Christmas Island we were kept for 7 months doing nothing. That time can be used better. Such things can always be used in life.' (Afghan, Male Participant)

'Why can't we be taught about some laws of Australia in English classes instead of things which are not of any use? All this should be in English classes.' (Afghan, Female Participant)

3.1.3.3 CULTURAL INFLUENCES OF HOST COUNTRY

The cultural influences of the host country inevitably has an effect on identities, perceptions and lifestyles. In some cases, the influences of alcohol, gambling and extra marital relationships become issues of concern for communities at large.

'Before coming here, we think western world is heaven; we have great expectations'. However due to culture shock and 'cultural clash' we are confused. Who am I? (Sierra Leonean, Female Participant)

'...Our community is not so much used to the multi-cultural nature of this environment. Conflict of cultures - all the little things effects family harmony'. (Sri Lankan, Male Participant)

'...most of the domestic violence occurs because of alcohol consumption...' (Sri Lankan, Male Participant)

'...Alcohol and gambling have long been the main cause of domestic violence in families. Alcohol and gambling have destroyed our families through weakening our financial status and has caused us a lot of suffering...' (Afghan, Female Participant)

'Majority of the domestic violence cases happen under the influence of alcohol. Finding happiness through the consumption of alcohol is one thing, but the end result in homes are the lack of control in expression...' (Sierra Leonean, Male Community Leader)

'This ego has prompted our husbands and young boys into using a lot alcohol that has brought too much problems in families.' (Afghan, Female Participant)

3.1.3.4 PROPOSER ISSUES

Participants disclosed that in some instances, the proposer was not transparent and participants variously described feeling deceived and misinformed by proposers.

'The Proposers (sponsors) are not opening up to us, they do not explain the Australian system clearly to us, nor do they give us any information/advice. Proposers take full control of our early settlement lives and do not consult with us at all; they treat us like children and it affects our dignity.' (Sierra Leonean, Male Participant)

'We lost dignity and shamed with 'degeneration' of our culture and this has really changed our lifestyle to even worse. Now, the community has become more aggressive. Besides that, we get a lot of pressure from home to send them money'. (Sri Lankan, Male Participant)

3.1.3.5 ELDER ABUSE

Some participants brought up the issue of 'elder abuse' in extended family homes where the parents/in-laws are instructed to take care of the children while the couple undertake full-time jobs. Conflict arises due to the generation gap and a clash between traditional and host-country values between the grandparents and grandchildren is often the result.

'Abuse of the elderly - grandparents are brought to Australia to take care of their grandchildren, so that the both parents can work peacefully...' (Sri Lankan Male participant)

3.1.3.6 IDENTITY ISSUES

Traditional roles of men shifting from 'breadwinner' to that of 'unemployed man' was emphasised in all consultations. Lack of sustained engagement with refugee men in education, vocational and prevention of domestic violence programs was a concern for all the communities.

'We get no jobs. Our qualifications are not recognised. I was an Engineer - there is nothing for me here. I worked in a meat factory and then standing for long in the freezer gave me back pain and headaches so I left the job. My wife works now in the same factory...' (Afghan, Male Participant)

'...she gets a job and when her husband joins her, he may not get work. As a result reigns within the family; the husband gets angry and perpetrates violence.' (Sierra Leonean, Male Participant)

'...When they come here, the wife finds a job and the husband don't work, or the wife earns more than the husband so this affects the husband's ego and may lead to domestic violence.' (Sri Lankan, Male Participant)

'Women adapt more easily than men; also get jobs more quickly; men wait to get the same level of job that they had back home...' (Sri Lankan, Female Participant)

'Family roles are different here. In Australia every individual's right is respected. And everybody has the right to freedom of expression...Traditionally our men will never do any domestic duties, but now whether young or old, they do their own work so the role of men is changing.' (Sri Lankan, Female Participant)

'My husband has tried everywhere for job, now he drives taxi, I work when he is home and we don't even see each other and when we do we argue over money and children. We have no time for each other. He is always angry he says Australians treat him as a dog.' (Afghan, Female Participant)

3.1.3.7 ECONOMIC ISSUES

All three communities mentioned Centrelink payments, in particular payments to women and to young people as a critical issue that has a serious impact on family harmony. Payments are given to women for child support and to young people if they live on their own. A common scenario cited was when teenage family members leave home and participate in actions that are seen as neglecting the cultural norms of their communities, it creates significant divide within the family. Underemployment, unemployment and impoverishment among refugee communities are evident among the participants in this research project. The high cost of house rent and children's educational/extra-curricular activities are well beyond their means. As well, many refugees are culturally obliged to send money back home to clear their debts and support their aged parents and remaining family members.

'Some of us are well educated and are well qualified in our areas of education/training. However, transition into this country's life is not easy. Our education and qualifications are not recognised here.' (Sierra Leonean, Male Participant)

'...People are willing to do any type of job due to financial constrains. Employment is the key element of settlement issues. But, we find it so hard to get employment because of our limitation of access, barriers. Our English language communication is not enough...' (Sierra Leonean, Female Participant)

'...My husband sends money to his family all the time. They have no money to eat. His parents are old. He is also paying for the loan he took from his friend to bring me here. He paid for everything for me. We got no help. Now we fight over money all the time.' (Afghan, Female Participant)

'Family pressure from home country: sponsoring parents and working extra to send money back home. It is a feeling of guilt, if we do not support our suffering relatives back home.' (Sri Lankan, Female Participant)

3.1.3.8 CHILDREN'S ISSUES

The question of 'child discipline' and its link to heightened violence was a subject of discussion amongst all the participants. Issues of child discipline included the adoption of unfamiliar parenting skills in a culturally different environment, a change in parenting roles (e.g. mother becomes the bread-winner), and children's empowerment through their knowledge of the English language and thus becoming the 'informants' to parents. This has lead to a shift in the traditional parenting roles and responsibilities (Simbadumwe 2006)

All three communities expressed confusion in dealing with issues of children, especially with 'assimilated' children who become carriers of information for the family, and interpreters for the parents. Participants felt their parenting skills were 'compromised' and 'undermined' as they felt they had to adopt a 'western' style of parenting in keeping with the norms of the dominant society. Adults frequently used the term 'home' as their primary reference point, whilst the dominant influences for children were outside the traditional space of 'home'. Child discipline and related issues including child protection and loss of parental authority caused anxiety and apprehension for refugee parents.

'..When family has low education and the young ones (children) learn quickly the power/control shifts to the children and so the only way to control the children is to use other means such as domestic violence.'(Afghan, Male Participant)

'...Here, parents and children have equal rights. Parents are scared of smacking the children when they misbehave. Thus, unable to instil the required discipline to the children.' (Sierra Leonean, Male Participant)

'…We feel the police are also insulting us. They listen to the kids more than to the parents. Children do lie to police, to CS and to others... teachers tend to listen only to the child, to the one-sided story. They must also talk to the parents to find out.' (Sierra Leonean female participant)

'..With youth allowance, when the parents ask children to contribute towards family expenses such as food and accommodation they refuse to give any money and spend it for themselves or threaten to leave home. Hence the children have to be educated on this; we are being divided by Government money. (Sierra Leonean, Community Leader Female)

'...My husband was killed in war and then my elder son became like his father. All money, he keeps. I don't know if that is good, but I am happy-he gives me good life -less headache for me... Yes, he gets angry, too much work for him, and then he saw his dad killed, his sister not listen to him and argue too much. But, she has to obey as him he feeds us all...' (Afghan, Female Participant)

'...Back home only after 18 years of age are girls allowed to have boyfriends. Here, girls as young as 11 years of age have boyfriends...' (Sierra Leonean, Female Participant)

'..The moment we try to correct our children or try to discipline them, they are told to ring the 000 number and the police intervene. This is a great shock and disrespect of parents.' (Sierra Leone, Female Participant)

'... In our homes we had a 'strict' discipline... when our parents spoke we never talked back, but listened and obeyed... here our children talk back to us, sometimes even challenge us!... I don't know how to react...' (Sri Lankan, Male Participant)

Some refugee parents felt that the host culture had 'positives' with regards to parent-child relationships, and were ready to accept the change in parenting roles, acknowledging with pride that that their children 'knew more than them'.

'...Back home there was a lot of power for parents, but it in Australia it is different. Fathers feel they have lost their role in the family. Back home it was only one way communication, but in Australia two way communications is encouraged between parents and children.'(Afghan, Male Participant)

'...Back home, the child will be disciplined physically as well. Here, this is against the law and we need more education and support around this issue. Parent-children communication must improve. (Sierra Leonean, Community Elder Male)

'... My 10 year-old daughter tells me all about her school discipline... what we are supposed to do and 'not to do'...It's a new experience for me to learn from her...'(Sri Lankan, Female Participant)

3.1.3.9 WOMEN'S ISOLATION AND LACK OF EXTENDED FAMILY

All refugee communities identified the loss of extended family as a support structure for mediation of family issues. Women in particular saw this as loss of protection for them in situations of family violence. Social isolation and 'feeling depressed' were reported widely in all consultations.

'..Traditional models of village are gone. Village was the support for the family. Informal counselling came from village and extended families. Even debriefing happened at extended family level. Here there is no family counselling that is provided in the models that they know. Office bound counselling is scary. It's interpreted as 'something wrong' with me.' (Sri Lankan, Female Participant Female)

'...the elders and/or family members normally intervene in domestic violence and try to resolve amongst themselves, and then we do not call the police. What else can we do? We don't want to call the police but when we have no one to turn to...' (Sierra Leonean, Female Participant)

'...Emotional attachment to home country, and making comparisons all the time...' (Sierra Leonean, Female Participant)

'...Isolation and lack of family support or no extended family; some live too far from the extended family... (Sierra Leonean, Female Participant)

'...Too many expectations. We are given a rosy picture of Australia and that it would be a good life but once we come here we are disappointed, this is mainly because of the misinformation.' (Sierra Leonean, Female Participant)

'...Depression continues in post arrival for 'other' reasons, but family members do not recognise or realise this.' (Sri Lankan, Community Leader)

Some saw community interaction as a coping mechanism, where they could share their experiences of Australia with others who had similar stories. It was evident that community networks are crucial for new-arrivals as they replace the traditional networks of the extended family.

3.1.3.10 OVER-CROWDED HOUSING AND LACK OF SPACE FOR FAMILIES

Housing was viewed as an important issue for new-arrivals. The type of accommodation they could afford was typically small, cramped and lacked privacy. Culturally, the refugee communities participating saw themselves as being from a 'vocal culture' and reported feeling conscious of being misjudged as 'aggressive.' Complaints from the neighbours, especially when living in apartments, was a site for potential interracial conflict, and refugees reported feeling marginalised within the neighbourhood.

'..We have to pay to bring our wives and children and repay the loans we take to bring them here. Then we can only afford very small units to live in. In two bedrooms we stay 5 people. We have no space sometime to talk to each other. If we talk loud the neighbour will say you are very loud. You make too much noise- we will call police.' (Afghan, Male Participant)

'...We are loud people. We are used to sitting and talking loudly.' (Sierra Leone, Male Participant)

'Housing problems - lack of space and privacy, when 2 or 3 generations are living together in the same house to cut-down on the high cost of rent. This causes conflicts due to different values and ideologies. Taking care of the old people (parents or grandparents) causes stress and leads to quarrels among spouses ... also, not living close by to transport, schools, shops... husband and wife will fight over who goes to buy the groceries...' (Sri Lankan Female, Participant)

3.1.3.11 PERCEPTIONS OF POLICE, WOMEN'S REFUGES AND OTHER SUPPORT AGENCIES
All the consultations supported the role of police with some admitting that if a refugee woman calls police, she is 'really desperate for help.' Communities reported that education about when a domestic issue becomes a crown case is not provided. In many family violence cases, calling the police was 'a cry for help by the woman' not 'a report against the family member'. The Sierra Leonean community saw the police as 'a community service', and when the police were called, they were thinking of 'family support unit' at home.

'...In Sierra Leone, they had community policing, a Family Support Unit who intervene; they do not separate the family.' (Sierra Leonean, Male Participant)

'Courts come last - when there is problem in the family, first they go to the religious leaders, then they talk to friends, if all fails they go to courts.' (Sri Lankan, Male Community Leader)

The social stigma that exists among refugees is expressed via a reluctance to seek assistance on family issues. This can act as an obstacle in the settlement process. However, some men accepted that seeking police help in a grave, domestic violence situation is 'unavoidable' implying that they consider police assistance as the 'last resort'.

'...Afghans have zeal. They feel disgrace to involve police, but sometimes they are forced to do so. When a human being acts like an animal then you have to involve police.' (Afghan, Male Participant)

'.. Men end up in jail and the women end up in regrets, because they get stigmatised and humiliated for having reported such matters...' (Sierra Leonean, Female Participant)

'...Stigma in discussing personal problems with professionals/services –'What will people say!'. (Sri Lankan Tamil, Female Participant)

It was reported that making a complaint of domestic violence was avoided by women, as they not only feared police and court involvement, but believe these matters to be 'family matters'.

'...Here, the problem is that once the police is called it's a criminal offence. If we don't do some mediation before, then it's too late. Why can't the community take leadership and help before calling the police?' (Afghan, Woman Participant)

'...Our wives don't want the police to punish us as husbands, but they want violence to stop.' (Sierra Leonean, Male Participant)

Reinforcing the importance of the 'traditional family unit', participants felt that calling the police to the home or using support systems is a 'stigma' for the family as well as the

community. Significantly, the men perceived the system as favouring women, whilst women felt that they lacked choice and it was in desperation that they used the legal system.

'...According to some people Australian government are more in favour of women, they always support them. Women are mostly scared of disgrace and scandals, that's why they often don't say anything about their problems.' (Afghan, Female Participant)

'...Normally police's interference causes breaking a family. If they can solve their problems through other agencies it would be better. When people fight they get emotional and they can't think what to do, the only thing they do is to call 000 and that's the time when everything finish. Our society won't accept an Afghan woman if she was under prosecution away from her husband's home even for two days.' (Afghan, Female Participant)

'...Police will only listen to the woman's story. All services support only women. In Australia, there are no human rights, only women's rights!' (Sierra Leonean, Male Participant)

'...We often say why women call police, the question is what else they can do when they need help, and they don't know any other solution for their problems. They don't have anyone here. We often hear that our community says that women should solve their problems. Tell us how?' (Afghan, Woman Participant)

The participants, in particular women, expressed that support services are not culturally sensitive to refugees – that issues of domestic violence should be taken up by a community-based 'intermediary' who is aware of their cultural values and their previous experiences.

'..Fear in talking to unknown people/services, leaks in confidentiality and no (community) support network to discuss with...' (Sierra Leonean, Female Participant)

'We often go and talk to our doctors we trust them...' (Sri Lankan, Female Participant)

'GPs are good, they listen to us...' (Afghan, Female Participant)

'People also open up to doctors - actually they are the first to know about family issues. They feel comfortable opening up to doctors as they trust them with their medical profile. Doctors refer their patients to counsellors... sometimes husbands accompany the women to GPs, so that they will not talk about domestic violence'. (Sierra Leonean, Community Leader Female)

Most of the female participants preferred not to use women's refuges as it was not only considered a social stigma and 'contradictory to their traditions', but they also cited cultural insensitivities being prevalent in women's refuges.

'I was asked to leave a refuge at 10pm at night as they said I had mental illness and they are not funded to work with mental illness. I said I am new to country where can I go. They gave me this number to call. I was so worried. I called my friend she came to take me.' (Afghan, Female Participant)

Counselling within the community was the preferred option and should be conducted by 'insiders' rather than 'outsiders', as mainstream support services were perceived to be

'inappropriate' and 'insensitive'. The participants felt that women needed to take the initiative to become family counsellors.

'...We need more women to become leaders as well as help. Counselling services for men and women should be established and if those service belong to government, police's involvement will be limited.' (Afghan, Male Participant)

'Problem is services see us only as clients … Why can't I be trained to become a councillor or work in a refuge?' (Afghan, Female Participant)

However, some felt otherwise, preferring counsellors from different communities, as they feared a breach of confidentiality.

'...Community members gossip too much. So I do not believe in talking to community members about domestic violence. Bilingual police workers could intervene instead of uniformed police officers. Often, the so called community leaders are not real leaders.' (Sierra Leonean, Female Participant)

'...Women need to talk to professionals from different community background; a qualified social worker from the community can be approached as they know about confidentiality and breach of privacy. Police could be called if necessary and the community needs to be educated about domestic violence and its consequence on the family.' (Sierra Leonean, Female Participant)

3.2 SUPPORT SERVICES

From the perspectives of support services, the participatory action research with its various solution driven consultations with community groups, settlement services as well as mainstream services aims at achieving results, of building reciprocal relationships by actively engaging the target communities in the research process, and giving them a voice to say what they think would work for them, within the laws and policies of the country.

The settlement services consultations reaffirmed the key concerns identified by refugee communities. All the consultations supported the role of police with some reinforcing the idea that if a refugee woman calls police she is 'really desperate for help'. The strength-based approach was identified as a critical model for working with refugee communities on issues of family violence.

'...Look for the strength and determination of these people and their ability to shift things for themselves, for what they want to see happen for them.' (Settlement Worker)

'In order to work with a group you need to gain their trust. When working with these communities we need to understand what the men and women are going through during settlement. There is an intense need to keep their culture intact, as they have lost everything including their identity (what they were prior to becoming refugees).Trauma of war, lack of control over their own lives and displacement, survivor guilt, experience of racism and racial prejudice in camps and the need to adapt to yet another new environment impact on their settlement process.' (Bi-lingual counsellor).

Whilst recognising that 'identity issues, changing gender roles, stressful period initial arrival, money management and housing are challenging issues for settlement, violence is not caused by these factors, but can exasperate situations for refugees post-arrival.' (IHSS Team leader)

On the other hand, mainstream services identified the issues of family violence as 'cultural' claiming that 'migrant women are used to putting up with some level of abuse as part of their upbringing.'

'...Communities should take responsibility in facilitating better dialogue with family members...' (Mainstream Worker)

'...Violence is cultural for these communities...' (DV Network)

Workers reported the difficulties experienced in accessing community members in order to make them come to information/education sessions. Notions of 'family violence as cultural' can be seen as 'not requiring a serious response.'

'…Normally these women are controlled by their men and they are not allowed to talk. DV is part of their cultures...' (DV Network)

3.2.1 CULTURAL MISMATCH OF SUPPORT SERVICES

Mainstream services identified that women come to seek help for other issues, and it is often only after that domestic violence is revealed. They do not want to talk about it as they feel it will divide the family. The notion that domestic violence is private business is prevalent. Family counselling is not looked upon favourably. There is the fear of losing the children if any complaints are made to police or other services. When linked with other services, the women are not seen again, that is, they do not approach the service that referred them initially, and hence are lost for any follow-up work. This loss is also perceived by some mainstream workers as 'lack of need' or 'lack of interest.' According to a women's health nurse, a woman could not find the place she was referred to, but when she finally got there she was not accepted. Overall, the following was suggested:

'There is a need to understand that the clients' inability to access the service could be because they simply don't know how to.' (Women's Health Nurse)

'...Due to lack of education/awareness women are reluctant to seek 'outside help'. Men on the other hand, perceive that if women seek outside help the family will break.' (DV Network)

Mainstream service participants recognised the fact that they need to talk to refugee clients individually and build relationships with members. They observed that:

'...calling it domestic violence becomes problematic if you want people to come to information sessions; people do not want to seek help or even come to such information sessions because they fear that their identity will be revealed to the rest of the community. There is a need to develop strategies for inclusivity.' (DV Network)

3.2.2 RECOGNITION OF THE REFUGEE JOURNEY

From the perspectives of bilingual workers and settlement services workers and their experiences of referring clients, recognition of pre-arrival experiences was essential for effective service provision. They expressed concerns that the system is not equipped to deal with refugees. Some of the bilingual workers who were participants of pre-embarkation information sessions themselves confirmed that it is not well absorbed and it does not

prepare them for the 'massive change' and 'culture shock' that refugees face on arrival. Their long journey as refugees and the initial settlement phase in new country further erodes the capacity for this information to be recalled or invoked in meaningful ways.

The on-arrival education about family violence is tokenistic and untimely. The need for inclusive practices was essential for meaningful and respectful 'interaction and education between services and refugees.'

'The integration programs, if scattered over time, will work better.' (Settlement Worker)

Pre-arrival experiences are not recognised or understood by the mainstream services. The following bears this out:

> *'...an early childhood nurse complained that the mother was not meaningfully interacting with the children. This single mother had been in a camp since the age of ten. At the age of 25 she had seven children, some of which were not her own to take care of. However, she had managed to bring them all safely to Australia, which in itself need to be regarded as a success story. But her children were considered to be 'neglected' within the existing framework.'*
>
> *(Bilingual counselling team)*

Family violence education programs are not settlement priorities and the issues of family relationship are not considered as traditional settlement issues within current policy frameworks.

'We do 5 minutes orientation on second day of arrival on Domestic violence, when even the jet lag is not gone, along with other things like registering with Centrelink, opening bank account, obtaining Medicare, using ATM card etc. They are given no education on what is Centrelink, what is that money to be used for. That's the way it is... What more can we expect from them?' (IHSS worker)

'Long term detention causes long separation of husband and wife. Children don't even recognise their parents.....in one case the Iraqi male got down his family after 10 years.' (Settlement Worker)

'Settlement services will exit their clients to a domestic violence service in cases where family violence is identified. From their standpoint there are not enough services that understand the refugees.' (Settlement worker)

3.2.3 WOMEN'S REFUGES

Women's refuges were considered problematic and refugee workers and mainstream domestic violence services agreed that refuges can be daunting for refugee women as 'they have to share common spaces with total strangers'. Refuges will not take in boys over 12 years of age and this can be a deterrent for the woman need of accommodation in a refuge.

'...The western feminist philosophy of refuges can also be daunting to these women as they are still steeped in the patriarchal view of women.' (DV Network)

'...a newly arrived client from Sierra Leone was left unattended at the refuge with no instructions on using cooking facilities. She arrived there at 6pm and could not have food until the next morning.

The refuge worker's response was that they didn't think it was their job to show refugees how to cook in Australia.' (Bilingual councillor)

'...a recently arrived refugee woman and her children were staying in a refuge ten days after arrival. She went shopping for food. Being very new to the country she did not understand the different kinds of food on the shelves, she bought dog food. When the refuge worker saw the food they accused her of trying to poison her children. For us this woman needs to be hailed for going to a big supermarket alone...' (IHSS worker)

It was suggested that refuges need to be equipped with community workers who speak the languages of clients, or at least with culturally competent workers who are able to access relevant support programs and services.

3.2.4 CULTURAL COMPETENCE AND INTERAGENCY COLLABORATION

Cultural competence in working with refugee communities in general, and on the issue of domestic violence in particular is critical for mainstream services to improve access (NSW Government, 2010). Initiating dialogue with bilingual workers and a collaborative case management approach is crucial for effective service provision to refugees. Regular updates on issues of new migrant and refugee groups will assist these services in being more sensitive to their needs.

Coordination and collaboration between the settlement and the family violence sector was seen as essential for 'the community sector to start taking an inclusive approach' with one worker commenting that, 'Australian policy is not ready for such diversity.'

' ..We have to improve on family education for newly arrived people, be more sensitive and approachable to them' (IHHS Worker).

However, it was felt that a broader and more critical approach from mainstream services could be developed through ongoing dialogue with bilingual workers. This would be mutually beneficial, most especially providing relevant and targeted services, instead of 'forcing' their strategies on women.

'...a successful model is where family relationship workers work with bilingual workers to understand the cultural aspects of the needs of the woman in situation of DV and not force their thoughts on the woman...in reality, policy is not ready for refugees. People are losing trust of services ...' (Mainstream counselling service)

Settlement workers saw a need for the expansion of training and resources in order to better service the needs of refugee women and their communities.

'...Although we are settlement workers we can't seem to find services that will assist our clients and we are dealing with the issues ourselves without being recognised.' (Settlement worker)

'...Education on family relationships becomes an important aspect of settlement issues, until they are ready to deal with the family context in a multi-cultural society.' (IHSS service)

3.2.5 INTERPRETERS

Many DV services admitted that using the telephone interpreter can be cumbersome, especially when communicating with a woman who is new to the system. However, to get a face-to-face interpreter, there is a waiting period and this has to be booked in advance. Interpreters in small communities are either friends of the family or known to them, thus going to court and using interpreters raises the issue of confidentiality. Occasionally, small communities do not have interpreters.

'Using interpreters for counselling is very difficult and not ideal for a long drawn out process. For the women themselves the concept of counselling is new, and bi-lingual counselling is also a new concept and not easy to find.' (Health Services Network)

Bilingual workers expressed concerns at children being 'used as carriers of information for families'.

'...Language is one of the difficulties. Children will be dominating – English Language is used by children not parents. They will control the information as well in many cases interpret. Services will make no effort to talk to adults through interpreters. The entire family dynamics change...' (Bi-lingual Counsellor)

3.2.6 ROLE OF RELIGIOUS LEADERS

One of the major women's service providers in Mt Druitt observed that generally women contact community and religious leaders first, or influential people in the community to intervene to save the relationship; on the other hand they will seek service providers' help if they plan to leave the relationship. However, many community leaders and religious leaders try to cover up DV. They do not provide appropriate response or support to both victims and perpetrators. Bilingual workers also identified the role of religious leaders 'as important point of contact for women.'

'Most Sierra Leone clients preferred community leaders, pastors and extended family members to intervene in issues of domestic violence; extended family members, non-relatives were also welcomed.' (IWSA workers)

Whilst recognising that leaders were seen as 'conservative' and 'in favour of men' and 'wanting to hold onto their power and position within the community by maintaining their conventional roles', it was argued that 'religious leaders cannot be excluded according to Western definition of 'progressive'. To effect change, 'all leaders must be trained, including the traditional ones.'

'Whether we like it or not, women will use community and religious leaders. It is in our interest to train leaders on these issues if we are interested in helping women.' (Bilingual counsellor)

3.2.7 CHILDREN'S ISSUES

Like the community consultations, children's issues dominated the consultations with bilingual workers. Participants indicated that schools, CS and Centrelink matters were major causes of disruptions to newly-arrived families.

'...Education on purpose of Centrelink payments needs to be mandatory - men do not like separate payments; wives and teenage children claim their own money, but will not contribute towards sharing household expenses.' (Women's Health worker)

'...A woman with six children living in a house near the highway; one of the children wandered out and she was reported by the support service as 'neglect' and faced the risk of all the children being removed instead of actually being supported to care for the children in a more safe environment. Another with many children was being referred from one agency to another; she had to keep repeating her story and had to run around to keep the appointments, with the children trailing behind her.' (Bilingual Counsellor)

3.2.8 INTERVENTION FOR MEN

Whilst recognising the vulnerabilities of refugee women, lack of services for refugee men was recognised especially by bilingual workers as they saw refugee men 'as part of marginalised refugee communities'. Unemployment and the changed role of the male were seen as a key issues that hinder their process of settlement.

'Quite a few incidents of domestic abuses, sometimes violent, are based on the man's 'secondary status' at home as unemployed or underemployed spouse.' (IHSS worker)

'...Negative education about CALD communities, refugee men in particular... men are scared of the image of being an 'abuser', as this is the stereotypical image of refugee men among communities. Our systems are not based on 'rights model'.' (Bilingual counsellor)

'...My male client was concerned that his wife was not learning how to use the ATM machine inspite of him asking several times. His worry was that he will be seen negatively. He wanted me to talk to his wife.' (Bilingual counsellor)

'...No intervention for the male (perpetrator) is available if found guilty. The police need to explain more clearly to the men what happens at court, what an AVO involves and that it is legally binding. There were no men's health officers or men's health policy. We need to devise creative ways of engaging refugee men.' (Refugee Health Improvement Network)

'Family violence services will traditionally support only women and refugee men cannot be linked to any service. They will also not be eligible for legal aid...' (IHSS worker)

3.2.9 INTERVENTION OF POLICE

Most of the bilingual workers believed that refugee women should be provided with a choice of whether they want to use the legal system or an alternative approach. In addition to the legal system, a system that promotes reconciliation and family harmony needs to be established especially for women who do not opt for police protection.

'...In cases of police intervention the women are ostracised and face further isolation.' (IWSA)

'...Women are reluctant to use police as they feel they are going against their family.' (DV network)

'...Young woman with 4 children, impacted by domestic abuse, bruising whilst in labour, isolated from community, evicted from home, no family support, went to refuge with young children, came

back... DOH refused accommodation, CS closed the case... Lot of time is spent on linking to the right service. Finally, this woman moved into private rental; no security for her. She doesn't want police...how do we protect her, she's alone in this house.' (Mainstream Support Worker)

'...If refugee woman calls the police they'll ask the police to talk to the man. They don't understand that police can't do that. It has become a crown case they will often ring to take the complaint back...' (DV Network)

Police hand out yellow cards to victims at the scene of the incident. When a report is lodged by them they are required to sign consent in order to be contacted by a service provider for support. Often women do not sign the forms at the scene of the incident, as it is volatile and the woman is fearful or generally unaware of the support that they will receive.

3.2.10 MENTAL HEALTH ISSUES

Mainstream services report mental health issues as a major issue affecting refugee communities, but there are limited services that cater for the specific needs of this group. Whilst services like the Transcultural Mental Health Centre (TMHC) and the Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) specialise in this area, long waiting lists indicate that there is a need to increase the resources of these two services in order to expand their services, and also to enhance mainstream counselling services with appropriate training for professionals.

3.2.11 WOMEN WITH NO RESIDENCY STATUS

Working with women with no residency status is problematic as they cannot be referred to services that require clients to be permanent residents. International students, women on dependent visas of international students, women on other temporary visas experiencing domestic violence are coming more and more to the attention of local services, both in the Baulkham Hills and Parramatta LGAs. However, community Health Services will offer service to non-residents.

3.2.12 INCONSISTENT DATA COLLECTION

Different agencies have different ways of collecting and recording data on domestic violence. There is no consistency or a standard format being used. However, in many DV inter-agencies, individual member agencies report the number of cases that they have serviced on a monthly basis. Here again, the recording of details such as country of birth, country of origin and language spoken at home are not all consistently recorded or in some cases not recorded at all.

3.2.12.1 SECONDARY RESEARCH DATA

While this project did not have the capacity to collect quantitative data, the researchers reviewed secondary sources to explore the problem. Gaining an accurate picture of the extent of family violence across our target groups was difficult. This was due to varying definitions of violence, gaps in the recording of data around ethnicity and language, and the under-reporting of incidents.

The main sources of data on domestic/family violence for the three target communities were the following:

- Women's Domestic Violence Court Advocacy Support (WDVCAP)
- Western Sydney Area Health Domestic Violence Screening data
- IWSA data
- Family Violence Strategy, Mt Druitt
- The NSW Police collect data on domestic violence; however such data cannot be retrieved with a breakdown by language spoken at home or country of birth/origin, as these variables are not mandatory in their records.

In the case of language spoken at home, this is not a mandatory question for police to complete, and police do not record the language used unless there is need for interpreter or translation services, or again, if this information is relevant to their investigation. The only available data is the amount of DV incidents per Local Area Command (LAC) not local Government areas. The researchers were informed that DV reports from the communities that they had nominated would be quite rare and that overall there was a low reporting rate for DV in the wider community and that it was suspected only 25% of DV assaults were reported to Police (Correspondence from C. Peacock, NSW Police, February 12, 2010).

The Immigrant Women Speakout Association of NSW Inc. (IWSA), the only state wide advocacy body for women from migrant and refugee backgrounds, provides a direct domestic violence support and casework service. IWSA is based at Harris Park in Western Sydney and records data on clients who access their service for domestic/family violence. Their data indicates that from 2006 to 2009 there has been a gradual increase in the percentages of women from two of the three target communities (Afghan and Sierra Leonean), but the statistics of the third Tamil group could not be retrieved as it is merged with that of the Indian community (although the two groups are separate arrival categories – one migrant and the other refugee). The increase in Afghan and Sierra Leonean women accessing IWSA could be attributed to the employment of workers speaking the two target group languages, indicating that language specific services are directly related to access.

3.2.12.1.1 DATA FROM MT DRUITT FAMILY VIOLENCE LEADERSHIP REPORT (JUNE 2007 TO AUGUST 2009):

The Family Violence Strategy at Mt Druitt provides case management, information and referral, services (for Mt Druitt area and immediate surroundings) and their recorded data is as follows:

Year & Month	Australian	ATSI	Unknown	Pacific Communities	Other Anglo	Other CALD

'Other CALD' is broken down as below:

Year	Afghanistan	Indian	Sri Lankan	Hindu	Sierra Leone	African	Islamic/Muslim

With reference to "other CALD" communities the data presented by the Mt Druitt Family Violence Service, indicate that around 8.5 % to 17 % of the clients come from various backgrounds other than Australian, other Anglo Australian, ATSI and Pacific island communities.

As categories were generalised (e.g. 'African', 'Middle Eastern', 'Muslim', 'Indian') there was significant overlapping of data categories making interpretation difficult.

The Women's Domestic Violence Court Advocacy Support collects data, and whilst providing relevant racial and linguistic identifiers, does not provide any further information that might facilitate further inquiry.

Public antenatal services in NSW are required to screen all women for DV. Data from Auburn, Westmead and Blacktown Hospitals for the years 2008 and 2009 indicates that a small number of women from the three communities (Afghan 550:16 (8%), Sierra Leonean 177:5 (3%), Tamil 177:2 (1%)) screened identified with DV. An in-depth quantitative analysis of this data is not considered relevant to the scope of this project, as we aim to understand the intersection of family violence with settlement.

4 | CONCLUSION

The popular belief that 'domestic violence is culturally sanctioned in some communities and therefore does not necessitate a serious response from law enforcement, legal authorities or other support services' (Rees & Peace 2006) places refugee women in a dangerous situation. The recognition of the specific experiences of refugee women in pre- and post-arrival phases, as well as in the first five years of settlement remains key to addressing the safety and well-being of refugee women and their families in Australia.

The challenges of settlement can push families to the edge, and if service providers, both government and non-government, are not equipped or adequately resourced to support refugee families in crisis, inevitably, it is women who bear the brunt of the failure of the system. In developing holistic and culturally appropriate responses to assist refugee women affected by family violence, strategies and programs must take into account pre-arrival experiences of trauma related to war violence, multiple displacement and other forms of human rights violations that may have occurred. Further, post-arrival and settlement issues must be addressed in their entirety, with mainstream services taking a more active role in providing culturally relevant and targeted services.

Alternatives options must also be developed as refugees and bilingual workers have expressed during the consultation. The refugee sector is rich in social capital, and mainstream services need to work in respectful partnerships with settlement service providers to ensure that the diversity of refugee needs are recognised and addressed.

- This work needs to be underpinned by a human rights framework to ensure that vulnerable individuals and groups are enabled in the process and have access to all available resources and information to determine their pathways.
- In revisiting the various visions of the participating stakeholders, the researcher envisioned this project as a collaborative effort in order to identify strategies with refugee communities to inform the development of an integrated delivery system capable of meeting the needs of the refugee women and families who are experiencing or are at risk of experiencing family/domestic violence during settlement.
- The stakeholder agencies (both mainstream services and refugee services) identified the need to be better resourced, equipped, accessible and equitable in order to service to the specific needs of refugee women and their families who are experiencing or are at risk of experiencing family/domestic violence; and to provide them with a holistic service in dealing with this issue during the settlement process.
- And finally, significantly, the refugee community aspired for a more understanding, just, inclusive and gender-sensitive system for supporting women by effectively addressing settlement issues and their impacts on family relationships, enabling women to lead full lives without fear of violence, and without being demonised or their communities being pathologised.

For refugee communities to receive culturally responsive services, development in the following key areas is required: better integration of cultural skills in domestic violence

service delivery; appraisal of culturally competent programs and reflection of cultural sensitivity in policy making, coupled with an increased prominence of CALD communities in the design; conceptualisation, implementation, and evaluation of domestic violence research (Bent-Goodley 2005). Overall, we need to develop knowledge on domestic violence through the lens of human rights so that critical change can be effected in how issues of family violence are approached in the contexts of different refugee communities.

We strongly encourage policymakers, community development workers, advocates, caseworkers, managers, support workers and project workers to move towards implementing the recommendations identified in this report.

For their part, men in refugee communities must take a leadership role by initiating internal discourses within their respective communities about family violence, actively develop and participate in education campaigns, and finally, support their sisters by speaking out about family violence.

In the words of a participant,

'…Understand the magnitude in terms of depth and width of the knowledge gap. Address the root causes of the problem. Policy makers should grasp the idea that Australia is a rapidly changing society and it has got many refugees and migrants that are not going to give up their cultures. They need to seriously look at a race neutral approach to this issue. Not make it a cultural problem but address this as an issue of a changing society where cultures are clashing with Western policies.' (Sri-Lankan Tamil, Young Male Participant)

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6 ANNEXURE

6.1 COUNTRY PROFILES

6.1.1 AFGHANISTAN

The Islamic Republic of Afghanistan is a country in South-Central Asia. It is commonly described as being located within South Asia, Central Asia, and sometimes Western Asia (or the Middle East). It is bordered by Pakistan, Iran, Turkmenistan, Uzbekistan and China in the far northeast.

In 1978 with the uprising of the Saur Revolution, the People's Democratic Party of Afghanistan (PDPA) that came to power implemented Afghanistan under a liberal and socialist agenda, replacing religious and traditional laws with secular/Marxist ones with many social and political reforms. Notably, the government reformed laws land reforms and on women's rights such as banning forced marriages, giving state recognition of women's right to vote, and introducing women to socio-political life[12].

The political history of the country passes through the PDPA's alliances with the Soviet Union and the secularist nature of the government that made it unpopular with rural Afghans in favour of the fundamentalist Islamic ideology. This was followed by the rebellion within the country which was countered by the government with the support of Soviet Union. Subsequently, in the 1990's, a US intervention lead to anti-government, religious fundamentalist forces gaining power in Afghanistan, and broke as civil war between various militias.

The civil conflict prolonged between the various militias with their ethnic, clan, religious, and personality differences surfacing and the civil war protracted over the past decades. Thousands of civilians chose to leave the country as refugees. As such, the Afghan community constitutes the world's largest refugee population, of which around 7000 have arrived to Australia as refugees. A specific community among Afghan refugees in Australia are the Hazaras, who were particularly targeted by the rise of the Taliban. Concentrated in the mountainous central and in many urban centres, they are physically distinctive, having typically a Central Asian rather than southern European phenotype, and are mostly Dovazdah Imami ('Twelver') Shiite rather than Sunni Muslims[13] (Malley, n.d.). Of the refugees, a good proportion had

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[12]Anahita Ratebzad, who was a major Marxist leader and a member of the Revolutionary Council wrote the famous *New Kabul Times* editorial (May 28, 1978) which declared: "Privileges which women, by right, must have are equal education, job security, health services, and free time to rear a healthy generation for building the future of the country. Educating and enlightening women is now the subject of close government attention...".

[13]Maley, W n.d. Australia's new Afghan refugees: contexts and challenges. Canberra, Australian Defence Academy,(n.d.). Available at: www.refugeecouncil.org.au/docs/..../malley-afghan-2.pdf (Accessed 16 June 2010).

been displaced in neighbouring countries such as Pakistan and Iran. Being the fourth largest group of refugees/asylum seekers to reach Australia, Afghans are accepted under the Refugee & Humanitarian Program. Of those who arrived during the period 1991-1999, 47% were children aged 18 and under. The women, due to the protracted war in Afghanistan have lost many generations of their families. Upon arrival in Australia their issues include trauma, poverty, political upheaval, loss of family members, repeated displacement, besides facing the atrocities of a log-drawn war in their home country. They have spent many years in detention camps and survived with inadequate basic needs, medical services, with a sense of fear and insecurity which has a major impact on their psycho-social health and well being.

6.1.2 SIERRA LEONE

The Republic of Sierra Leone is situated in West Africa, bordered by Guinea, Liberia and the Atlantic Ocean in the southwest. Sierra Leone has a population estimated at 5.2 million.

The civil war in Sierra Leone began in 1991 initiated by the Revolutionary United Front (RUF) under Foday Sankoh. Thousands were killed in the war and more than 2 million people (well over 33% of the population) were displaced during the conflict, seeking refuge in neighbouring countries as Guinea and Liberia that became host countries. In the year 1991 alone approximately 107,000 refugees fled the conflict into Guinea. With forced recruitment of children by the state in 2000, the situation in the country deteriorated to such an extent that British troops were deployed in 'Operation Palliser' to evacuate foreign nationals and establish order. British forces unilaterally intervened in 2000 and took effective control of the government and organised an offensive against the rebels. The situation was then stabilised and catalysed a 'cease-fire'. The cease-fire was to reinvigorate the peace process and the agreement was signed in November 2000. However, disarmament was not evident, and fighting continued. Within the years of civil war, atrocities and ineffectual intervention crippled Sierra Leone. While RUF rebels controlled the diamond trade, the people remained among the poorest on Earth. With British intervention, the rebel leader was captured, the peace process resumed, and a British training team was left to reconstruct the armed forces into an instrument of reliable state security. Within a year, UN forces were in full control of the country, and gradually began handing over control to the reconstituted and retrained Sierra Leonean armed forces.

The country suffered many war crimes - terrorism, collective punishments, extermination, murder, rape, outrages upon personal dignity, conscripting children under the age of 15 years into armed forces, enslavement and pillage. During the 9 year period (1991-2000) an estimated 120,000 people fled to Liberia and a further 370,000 crossed into Guinea during the Sierra Leone civil war. The United Nations Refugee Agency (UNHCR) launched a three-year repatriation operation which

helped 178,000 Sierra Leonean refugees to go home after the country's civil war. After the civil war, diamond revenues in Sierra Leone have increased more than tenfold, although according to official surveys of mining sites considerable illegal smuggling of diamonds continues[14] (IRIN, 2004).

6.1.3   SRI LANKA

The Socialist Republic of Sri Lanka, known as Ceylon before 1972, is an island country in South Asia, located about 31 kilometres from the southern coast of India, a nation with which it shares common culture, language and religion. Besides its location in the path of major sea routes, Sri Lanka is a strategic naval link between West Asia and South East Asia. It has also been a center of the Buddhist religion and culture from ancient times, as well as being a bastion of Hinduism.

The Sinhalese community forms the majority of the population; Tamils, who are concentrated in the north and east of the island, form the largest ethnic minority. After over two thousand years of rule by local kingdoms, parts of Sri Lanka were colonised by Portugal and the Netherlands beginning in the 16th century, and in 1815 under the British Empire. A national political movement rose in the country in the early 20th century with the aim of obtaining political independence, which was eventually granted by the British after peaceful negotiations in 1948. One of the aspects of the independence movement was that it was very much a Sinhalese movement. As a result, the country was 'remodelled' as a Sinhalese nation-state. The enactment of the 'Sinhala Only' Act marginalised the Tamil community in many ways including land colonisation and state employment

During this period the 'prominent Liberation Tigers of Tamil Eelam (LTTE) emerged as the 'sole representatives' of the Tamil people by eliminating the other Tamil groups, rebelled against the Indian Government's intervention as the Indian Peacekeeping Force In the North/East from 1988-91[15] (Loganathan, 1996), and breaking the 'Ceasefire- Agreement (2002-2006) with the Sri Lankan Government [16](Uyangoda, 2003). During this period various human rights violations were evident – killings, disappearances, arbitrary detentions, sexual violence against women, suicide/bomb attacks on civilian population and conscription of children by militants. The Impact of the civil war has generated millions of internally displaced

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[14]IRIN News 2004. Sierra Leone: Repatriation of refugees after civil war finally ends. Dakar, 22 July 2004. Available at : www.irinnews.org/report.aspx?reportid=50801 [Accessed 9 June 2010]..

[15]Loganathan, Kethesh 1996. Sri Lanka: Lost opportunities: past attempts in resolving ethnic conflict. Centre for Policy Research & Analysis UNSL.

[16]Uyangoda, J (ed.) 2003. Sri Lanka's Peace Process 2002: critical perspectives. Social Scientists' Association, Colombo.

as well as refugees. Sri Lankan Tamils have fled to India (as their second country), Australia, Canada and Europe (particularly France, Denmark, Germany),United Kingdom, and to the Scandinavian Countries, mostly as refugees/asylum seekers. In May 2009 the 30 year-old, civil war ceased with the defeat of the LTTE and death of their leadership.

6.2 Consultation Schedules

6.2.1 Training Bi-lingual Workers Schedule

Centre for Refugee Research

Reciprocal research training for bilingual workers

Trainer – Rebecca Eckert

Story circle questions

In small groups share stories about your community's experiences of family violence and its impact on the individuals, families and communities concerned:

1. A story about family violence occurring within your community in your home country.
2. A story about family violence occurring whilst your community was displaced and seeking asylum (eg. Whilst feeling persecution, in camps or urban areas)
3. A story about family violence occurring within your community here in Australia.

Storyboard questions

1. Depict an issue within your community relating to family violence.
2. What is the impact on the individuals, families and communities concerned?
3. How does your community respond to issues relating to family violence?
4. Where do individuals and families experiencing violence go for help? What sort of help is provided? Is it effective?
5. If you were in charge of services for refugees what would you provide for these refugees, their families and the community in order to address this issue?
6. Who do you think could provide these services? Who would you want to do this? What help would the community need to address it and how might they do this?
7. If all these services were available what would be the best outcome for these refugees?

6.2.2 Key Thematic Areas Covered in Research Consultations

6.2.2.1 Consultations with Women and Men

Pre Arrival Experiences

In order to establish the family violence experiences of refugee women it is essential to also have an understanding of their experiences before they arrive to Australia.

How did camp and urban conditions impact upon families?

How did they deal with family conflict before becoming refugees?

What were some of the family violence experiences women have encountered in camps and urban settings?

What protection mechanisms were available for women and girls in family violence situations in countries of first asylum? Were they effective?

How do experiences of sexual and gender based violence impact upon the families of refugee women and girls?

Post Arrival Experiences

To understand the interface of settlement and family violence experiences of refugee women in Australia, it is important to identify the stages of settlement, settlement needs and the relationship between the needs and family violence experiences. The core risk factors that may impact upon their ability to settle successfully in Australia will also be investigated.

Settlement experiences

What are some of needs of refugee women when they arrive in Australia?

During the different stages of settlement what are the support mechanisms available for women?

How do pre-arrival experiences impact upon post settlement needs and outcomes?

What do refugee women and their families define as risks for family breakdown during settlement?

Experiences of Family Violence

What are women's experiences of family violence during the settlement period?

How do these experiences compare with their experiences before arrival?

What are women's perceptions of family violence amongst refugees?

What are the support mechanisms for women that are affected by family violence on arrival? Are these different from what they expected?

What are the experiences of refugee women that are using family violence services (e.g refuges, court support services, police?)

6.2.2.2   CONSULTATIONS WITH SERVICE PROVIDERS AND KEY STAKEHOLDERS

The following thematic areas were explored:

What are their experiences of dealing with family violence issues amongst refugees from Afghanistan, Iraq, Sierra Leone and Tamil backgrounds?

What types of services are available for refugee women that are going through family violence and how accessible are they?

What family violence prevention and support services are provided on arrival?

Are these services effectively responding to the needs of newly arrived refugees that are at risk of family violence eg prior family violence history, gender based violence experiences?

What protection mechanisms are in place to respond to family violence for refugee women in early stages of family violence?

How do participants perceive the ethics of research with refugees?

6.3 ACRONYMS

ABS - Australian Bureau of Statistics

ACL– Australian Centre of Languages

ADSi- Auburn Diversity Services Inc. (Formerly Auburn Migrant Resource Centre)

ACWA - Association for Children's Welfare Agencies

AMES – Adult Migrant English Services

ASeTTS - Assisting Torture and Trauma Survivors

CALD - Culturally and Linguistically Diverse

CRR – Centre for Refugee Research

CS - Community Services (Formerly Department of Community Services DoCS)

CSC - Community Service Centre

DIMIA- Department of Immigration and Multicultural and indigenous Affairs

DVCS – Domestic Violence Crisis Services

FPNSW – Family Planning New South Wales

FRSA - Family Relationships Services in Australia

HDVPC - Hills Domestic Violence Prevention Committee

IHSS - Integrated Humanitarian Settlement Strategy

IWDVS – Immigrant Women's Domestic Violence Service

IWSA - Immigrant Women's Speakout Association of NSW Inc.

IDP - Internally Displaced Person/s

LAC – Local Area Command

MRC – Migrant Resource Centre

MSU - Multicultural Services Unit

n.d – No Date Available for the reference

NESB - Non English Speaking Background

NMCADV – New Mexico Coalition Against Domestic Violence

NSW - New South Wales

OWN – Older Women's Network

PADV – Partnership Against Domestic Violence

PTSD - Post Traumatic Stress Disorder

RCOA – Refugee Council of Australia

STARTTS - Service for the Treatment and Rehabilitation of Torture and Trauma Survivors

SWAHS - South Western Area Health Service

TCMHC – Transcultural Mental Health Centre

THHP MRC – The Hills Holroyd Parramatta Migrant Resource Centre

UN - United Nations

UNHCR – United Nations High Commissioner for Refugees

UNICEF – United Nations Children's Fund (formerly United Nations International Children's Emergency Fund)

UNSW - University of New South Wales

VAWSU – Violence Against Women Support Unit

VOLAGs - Voluntary Resettlement Agencies

WSAAS - Western Sydney Area Assistance Scheme